## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Apr 27, 2005 8:00 am Secretary of State 04-27-2005 90329 034 \*\*\*150.00 DOCUMENT # F97000005531 GIVAUDAN FLAVORS CORPORATION Principal Place of Business Mailing Address 14000967 1199 EDISON DR. 1199 EDISON DR. CINCINNATI, OH 45216 CINCINNATI, OH 45216 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04192005 Cha-P CR2E034 (10/03) Applied For City & State City & State 4 FEI Number 43-1478592 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. COBD TITLE TITLE ☐ Change ☐ Addition ☐ Delete DAVIS, MICHAEL E NAME NAME STREET ADDRESS 1199 EDISON DR. STREET ADDRESS CITY-ST-7/P CINCINNATI, OH 45216 CITY-SI-7IP ☐ Delete une ☐ Change Addition TITLE IMESCH, ALBERT NAME 1199 EDISON DR. STREET ADORESS STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45216 CITY-ST-ZIP VPS ☐ Addition TITLE ☐ Delete TITLE ☐ Change KING, FREDERICK G NAME NAME STREET ADDRESS 1199 EDISON DRIVE STREET ADDRESS CITY-ST-7IP CINCINNATI, OH 45216 CITY-ST-ZIP TITLE X Delete TITLE President ☐ Change ★ Addition PELLEGRINO, ROBERT C NAME NAME Daniel C. McCafferty 1199 EDISON DR. STREET ADDRESS STREET ADDRESS 1199 Edison Drive, Cincinnati, OH 45216 CITY-ST-ZIP CITY-ST-ZIP CINCINNATI, OH 45216 TITLE ☐ Delete TITLE ☐ Change ☐ Addition STAFFORD, ERROL G W NAME NAME 1775 WINDSOR RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TEANECK, NJ 07666 CITY-ST-ZIP ☐ Addition TITLE A\$ Defete TITLE ☐ Change LUTH, MARY A NAME NAME STREET ADDRESS 1199 EDISON DR STREET ADDRESS CITY-ST-ZIP CINCINNATI, OH 45216 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Albert Imesch, Treasurer

NTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**