

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F98000000310

1. Corporation Name

Gucci Timepieces (America) Inc.

Principal Place of Business

Mailing Address

50 HARTZ WAY  
SECAUCUS NJ 07094

FILED

99 MAR 17 PM 1:22

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

November 14, 1997

4. FEI Number

22-3550036

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible Personal  
Property Tax ☐ Yes ☒ No

2. Principal Place of Business

21 50 Hartz Way

Suite, Apt #, etc.

22

City & State

23 Secaucus, New Jersey

Zip

24 07094

Country

25 USA

2a. Mailing Address

26 50 Hartz Way

Suite, Apt #, etc.

27

City & State

28 Secaucus, New Jersey

Zip

29 07094

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

83

City

Plantation

FL

85 Zip Code  
33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

President

Dominique Vananty

Gewerbe Strasse 1, Lengnau

Switzerland

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Vice President

Douglas Jacobs

Gewerbe Strasse 1, Lengnau

Switzerland

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Secretary

Arthur Leshin

50 Hartz Way

Secaucus, New Jersey 07094

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Treasurer

Gerald Thompson

50 Hartz Way

Secaucus, New Jersey 07094

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Director

Domenico DeSole

Via Don Lorenzo Perosi, 6, 50018 Casellina,

Scandicci, Florence, Italy

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Director

Brian Blake

Via Don Lorenzo Perosi, 6, 50018 Casellina,

Scandicci, Florence, Italy

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

Director

Robert Singer

Via Don Lorenzo Perosi, 6, 50018 Casellina,

Scandicci, Florence, Italy

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

Director

Dominique Vananty

Gewerbe Strasse 1, Lengnau

Switzerland

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

200002814582

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\*\*\*\*158.75 \*\*\*\*158.75

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Arthur Leshin

03/11/1999

(201) 867-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/17/99