

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004711

FILED
Jan 05, 2010
Secretary of State

Entity Name: GUERLAIN, INC.

Current Principal Place of Business:

LEGAL DEPT.
19 EAST 57TH STREET,5TH FL
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

LEGAL DEPT.
19 EAST 57TH STREET,5TH FL
NEW YORK, NY 10022

New Mailing Address:

FEI Number: 13-0809160 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC
Name: BOILLOT, LAURENT
Address: 19 EAST 57TH STREET
City-St-Zip: 9NEW YORK, NY 10022

Title: D
Name: DUTREIL, RENAUD
Address: 19 E.57TH STREET
City-St-Zip: NEW YORK, NY 10022

Title: DPCE
Name: BAXTER, PAMELA
Address: 19 E 57TH STREET
City-St-Zip: NEW YORK, NY 10022

Title: S
Name: FIRESTONE, LOUISE
Address: 19 EAST 57TH STREET
City-St-Zip: NEW YORK, NY 10022

Title: SVP
Name: TEFRA, BERTRAND
Address: 19 EAST 57TH STREET
City-St-Zip: NEW YORK, NY 10022

Title: SVP
Name: GRILLO, JOANNA
Address: 19 E 57TH STREET
City-St-Zip: NEW YORK, NY 10022

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LOUISE FIRESTONE

SEC

01/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date