

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004760

Entity Name: L'OCCITANE, INC.

FILED
May 30, 2006
Secretary of State

Current Principal Place of Business:

10 EAST 39TH STREET
8TH FLOOR
NEW YORK, NY 10016

New Principal Place of Business:

Current Mailing Address:

10 EAST 39TH STREET
8TH FLOOR
NEW YORK, NY 10016

New Mailing Address:

FEI Number: 13-3844764

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 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GEIGER, REINOLD
Address: 2-1 ST. MAURICE, BP 307
City-St-Zip: MANOSQUE, 04103 FRANCE, FR 04103 FR

Title: V () Delete
Name: GUINARD, STEPHANIE
Address: 10 E 39TH ST, 8TH FL
City-St-Zip: NY, NY 10016 US

Title: T () Delete
Name: CAMBOURS, FRANCOIS
Address: 10 EAST 39TH STREET, 8TH FLOOR
City-St-Zip: NEW YORK, NY 10016 US

Title: SD (X) Delete
Name: BRADEN, NICK
Address: 10 E 39TH ST, 8TH FL
City-St-Zip: NY, NY 10016 US

Title: D () Delete
Name: HENRI, BIARD
Address: 2-1 ST. MAURICE, BP 307
City-St-Zip: MANOSQUE, 04103 FRANCE, FR 04103 FR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GEIGER, REINOLD
Address: 10 EAST 39TH STREET
City-St-Zip: NEW YORK, NY 10016 US

Title: SD (X) Change () Addition
Name: AMIGORENA, CHRISTOPHE
Address: 10 EAST 39TH STREET 8TH FLOOR
City-St-Zip: NEW YORK, NY 10016 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANCOIS CAMBOURS

TREA

05/30/2006

Electronic Signature of Signing Officer or Director

Date