

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001561

Entity Name: ELC BEAUTY LLC

FILED
Mar 07, 2007
Secretary of State

Current Principal Place of Business:

7 CORPORATE CENTER DRIVE
ATTN: TAX DEPARTMENT
MELVILLE, NY 117473166

New Principal Place of Business:

Current Mailing Address:

7 CORPORATE CENTER DRIVE
ATTN: TAX DEPARTMENT
MELVILLE, NY 117473166

New Mailing Address:

FEI Number: 11-3599707

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

MANAGING MEMBERS/MANAGERS:

Title: SVPD () Delete
Name: KUNES, RICHARD W
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: P () Delete
Name: BRESTLE, DANIEL J
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: ST () Delete
Name: SCHWECHERT, JAMES P
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: AS () Delete
Name: CAPPELL, LISA
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

ADDITIONS/CHANGES:

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

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

Title: VP (X) Change () Addition
Name: SCHWECHERT, JAMES P
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LISA CAPPELL

AS

03/07/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date