2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2008
Secretary of State

DOCUMENT# M01000001561

Entity Name: ELC BEAUTY LLC

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:	VP	( ) 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:	SCHWECHERL, 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 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 03/27/2008

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