

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001561

Entity Name: ELC BEAUTY LLC

FILED  
Feb 04, 2011  
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  
Name: KUNES, RICHARD W  
Address: 7 CORPORATE CENTER DRIVE  
City-St-Zip: MELVILLE, NY 11747

Title: EVP  
Name: MOSS, SARA  
Address: 7 CORPORATE CENTER DRIVE  
City-St-Zip: MELVILLE, NY 11747

Title: VP  
Name: SCHWECHERL, JAMES P  
Address: 7 CORPORATE CENTER DRIVE  
City-St-Zip: MELVILLE, NY 11747

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

I hereby 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

02/04/2011

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