

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P23361

1. Entity Name
SHISEIDO COSMETICS (AMERICA) LTD. INC.



Principal Place of Business

**900 3RD AVE
NEW YORK, NY 10022 US**

Mailing Address

**178 BAUER DR
OAKLAND, NJ 07436 US**



04052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-2545265

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORP. SYSTEM INC.
1201 HAYES STREET
SUITE 105
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000708323
04/24/07-80111-006 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CEO
MANHEIMER, HEIDI
900 THIRD AVENUE
NEW YORK, NY 10022**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
CARLSON, KAREN
900 THIRD AVENUE
NEW YORK, NY 10022**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEC
KENDY, JOSEPH
100 TOKENEKE ROAD
DAREN, CT 06820**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
TIRSCH, JAOZIA
900 THIRD AVE
NEW YORK, NY 10022**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
COHEN, JEFF
178 BAUER DRIVE
OAKLAND, NJ 07436**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeff Cohen, VP Finance 4/11/07

Date

201-337-3750

Daytime Phone #