

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23361

FILED  
Apr 24, 2008  
Secretary of State

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

**Current Principal Place of Business:**

900 3RD AVE  
NEW YORK, NY 10022 US

**New Principal Place of Business:**

**Current Mailing Address:**

178 BAUER DR  
OAKLAND, NJ 07436 US

**New Mailing Address:**

FEI Number: 13-2545265      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: MANHEIMER, HEIDI  
Address: 900 THIRD AVENUE  
City-St-Zip: NEW YORK, NY 10022

Title: VP ( ) Delete  
Name: CARLSON, KAREN  
Address: 900 THIRD AVENUE  
City-St-Zip: NEW YORK, NY 10022

Title: SEC ( ) Delete  
Name: KENDY, JOSEPH  
Address: 100 TOKENEKE ROAD  
City-St-Zip: DAREN, CT 06820

Title: VP ( ) Delete  
Name: TIRSCH, JAOZIA  
Address: 900 THIRD AVE  
City-St-Zip: NEW YORK, NY 10022

Title: VP ( ) Delete  
Name: COHEN, JEFF  
Address: 178 BAUER DRIVE  
City-St-Zip: OAKLAND, NJ 07436

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: JEFF COHEN

Electronic Signature of Signing Officer or Director

VP

04/24/2008

\_\_\_\_\_ Date