

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34832

Entity Name: BOTTEGA VENETA, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

635 MADISON AVE
NEW YORK, NY 10022 US

New Principal Place of Business:

Current Mailing Address:

50 HARTZ WAY
SECAUCUS, NJ 07094 US

New Mailing Address:

FEI Number: 13-2704379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CSC
1201 HAYS 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: S () Delete
Name: MOSS, JONATHAN
Address: 50 HARTZ WAY
City-St-Zip: SECAUCUS, NJ 07094 US

Title: CFO () Delete
Name: GIOVANNETTI, GIUSEPPE
Address: 50 HARTZ WAY
City-St-Zip: SECAUCUS, NJ 07094 US

Title: P () Delete
Name: JOVICIC, SANDRA
Address: 50 HARTZ WAY
City-St-Zip: SECAUCUS, NJ 07094 US

Title: AS () Delete
Name: STUDENT, LINDA
Address: 50 HARTZ WAY
City-St-Zip: SECAUCUS, NJ 07094 US

Title: D () Delete
Name: DIMARCO, PATRIZIO
Address: 50 HARTZ WAY
City-St-Zip: SECAUCUS, NJ 07094 US

Title: VP () Delete
Name: LOMBARDO, KAREN
Address: 50 HARTZ WAY
City-St-Zip: SECAUCUS, NJ 07094 US

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:

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City-St-Zip:

Title: () Change () Addition
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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: LINDA STUDENT

AS

04/27/2009

Electronic Signature of Signing Officer or Director

Date