



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Foreign Non-Profit  
Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000794392

2. Name of Corporation THE COSMETIC EXECUTIVE WOMEN FOUNDATION LTD.

3. State of Incorporation

State: NY

4. Corporate Address in Rhode Island

No. and Street: 8TH FLOOR 159 WEST 25TH STREET

City or Town: NEW YORK

State: RI Zip: 10001 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 159 WEST 25TH STREET

8TH FLOOR

City or Town: NEW YORK

State: NY

Zip: 10001

Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

NATIONAL EMPLOYEE FUNDRAISING CAMPAIGN

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	CARLOTTA JACOBSON	8TH FLOOR 159 WEST 25TH STREET NEW YORK, NY 10001 USA
TREASURER	SABINE FELDMAN	8TH FLOOR 159 WEST 25TH STREET NEW YORK, NY 10001 USA
CHIEF OPERATING OFFICER	CLAUDIA FLOWERS	8TH FLOOR 159 WEST 25TH STREET NEW YORK, NY 10001 USA
DIRECTOR	CARLOTTA JACOBSON	8TH FLOOR 159 WEST 25TH STREET NEW YORK, NY 10001 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI  
02888

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 9 Day of June, 2015 at 10:46:03 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By CLAUDIA FLOWERS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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