

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 221461

**Entity Name:** PARMS ARMS INC

**Current Principal Place of Business:**

2243 CALAIS DRIVE  
#1  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

2243 CALAIS DRIVE  
STE. 1  
MIAMI BEACH, FL 33141

**FEI Number:** 59-6067458

**Certificate of Status Desired:** No

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

BECERRA, SILVIA  
2243 CALAIS DRIVE  
STE #1  
MIAMI BEACH, FL 33141 US

*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

**Officer/Director Detail :**

Title PS  
Name BECERRA, SILVIA  
Address 2243 CALAIS DR., #1  
City-State-Zip: MIAMI BEACH FL 33141

*I hereby 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 all other like empowered.*

**SIGNATURE:** SILVIA BECERRA

**PRESIDENT**

**04/01/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date