

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 139080

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** PERUVIAN AVENUE CORPORATION

**Current Principal Place of Business:**

504 PINTO CIRCLE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2561  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 59-0967610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIEDLAND, KIRK  
250 S. AUSTRALIAN AVENUE, #601  
WEST PALM BEACH, FL 33401 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

**OFFICERS AND DIRECTORS:**

Title: DT  
Name: HOLZER, JANE  
Address: 41 E 65TH STREET  
City-St-Zip: NEW YORK, NY 10021

Title: D  
Name: HANDELSMAN, BURTON  
Address: BOX 28, GEDNEY STATION  
City-St-Zip: WHITE PLAINS, NY 10605

Title: S  
Name: SMYTHE, MARTHA  
Address: 504 PINTO CR.  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: ELLMER, KEN  
Address: 876 CENTENNIAL AVENUE  
City-St-Zip: PISCATAWAY, NJ 08854

Title: D  
Name: LESE, SCOTT  
Address: 356 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480

Title: DV  
Name: HANDELSMAN, STEVEN  
Address: BOX 28 GEDNEY STATION  
City-St-Zip: WHITE PLAINS, NY 10605

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: SHERRY FRANKEL

PRES

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date