

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002018

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** PARX GROUP OF NEW YORK INC.

**Current Principal Place of Business:**

4645 S CLYDE MORRIS BLVD  
STE 407  
PORT ORANGE, FL 32129 US

**New Principal Place of Business:**

**Current Mailing Address:**

4645 S CLYDE MORRIS BLVD  
STE 407  
PORT ORANGE, FL 32129 US

**New Mailing Address:**

**FEI Number:** 16-1554037      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

RUFFINO, PATRICIA  
4645 S CLYDE MORRIS BLVD  
STE 407  
PORT ORANGE, FL 32129 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: PC  
Name: RUFFINO, PATRICIA A  
Address: 4645 S CLYDE MORRIS BLVD - STE 407  
City-St-Zip: PORT ORANGE, FL 32129 US

Title: SC  
Name: PERNO, LEONARD F  
Address: 90 AIRPARK DRIVE, SUITE 305  
City-St-Zip: ROCHESTER, NY 14624

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: PATRICIA RUFFINO

CEO

04/16/2012

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

\_\_\_\_\_  
Date