

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003795

**FILED**  
**Jul 17, 2012**  
**Secretary of State**

**Entity Name:** PARAS AND ASSOCIATES, INC.

**Current Principal Place of Business:**

6400 HOLLIS ST SUITE 9  
EMERYVILLE, CA 94608

**New Principal Place of Business:**

**Current Mailing Address:**

6400 HOLLIS ST SUITE 9  
EMERYVILLE, CA 94608

**New Mailing Address:**

**FEI Number:** 59-3828700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELTON, WENDY L  
49 SIOUX LANE  
LANTANA, FL 33462 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:** CP  
**Name:** PARAS, MELINDA  
**Address:** 1461 CURTIS ST  
**City-St-Zip:** BERKELEY, CA 94702

**Title:** D  
**Name:** CHAN, TIK-YUEN  
**Address:** 1848 JEFFERSON ST  
**City-St-Zip:** CONCORD, CA 94521

**Title:** CP  
**Name:** OTAKE, RAYMOND  
**Address:** 1848 JEFFERSON ST  
**City-St-Zip:** CONCORD, CA 94521

**Title:** S  
**Name:** ENGLIS, BARBARA  
**Address:** 1461 CURTIS ST  
**City-St-Zip:** BERKELEY, CA 94702

**Title:** T  
**Name:** PRAETZ, PETER  
**Address:** 1S866 GREEN RD  
**City-St-Zip:** ELBURN, IL 60119

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:** PETER G. PRAETZ

CFO

07/17/2012

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

\_\_\_\_\_  
Date