## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9300003378 (7) 1. Corporation Name PARMEL CORP.

## **FILED** Jun 04 1997 8:00am Secretary of State



Principal Place of Business POST OFFICE BOX \$57 70 HILLTOP ROAD RAMSEY NJ 07446		Mailing Address POST OFFICE BOX 357 70 HILLTOP ROAD RAMSEY NJ 07448-1150			
				3. Date Incorporated or Qualified 07/23/1993	3a, Date of Last Report 05/01/1996
2. Principal P	Place of Business	2a. Mailing Address 26	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. Fel Number 41-3110940	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	B. This corporation has liability for in	
24	25 A. Name and Address of Curre		30		Yes No
GFF	AURIE	nt Hegisterea Agent	81 Name	10. Name and Address of New Reg	listered Agent
635 UNIT	SE 12TH AVE 1 129 E CORAL FL 33990			ess (P O Boy Number is Not Acceptable	E) HAS KOXO
411. Pursuant office or r agent. I a			1 1 2 M/s	poration submits this statement for the purion's board of directors. I hereby accept the CARTARY	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD J	DELETE	1.1 TITLE		Change Addition
NAME	KANE, MICHAEL		1.2 NAME		
STREET ADDRESS	70 HILLTOP ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	RAMSEY NJ 07446		1.4 CITY - ST - 7i₽		
TITLE	CURNIN, PERI	DELETE	2 1 1IILE		Change Addition
NAME	1111 PARK AVE., APT. 2E	·	2.2 NAME		
STREET ADDRESS	NEW YORK NY 10128		2.3 STREET ADDRESS		
CITY-ST-ZIP	VPTD	DE LETE	2. 4 CITY - \$1 - 7/P		
TITLE	MANNIS, DAVID	L] DELETE	3.1 TITLE		Change Addition
NAME	6006 FIELDSTON ROAD		3.2 NAME		
STREET ADDRESS CITY-ST-ZIP	BRONX NY 10471		3.3 STREET ADDRESS		
TITLE		DELETE	3.4 C(1Y+S1+ZIF 4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 C(1Y - S1 - ZIP		
TITLE		DECETE	5.1 TITLE		Change Addition
NAME		-	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - 7)P		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		- ,
STREET ADDRESS			6.3 STREET ACORESS		
CITY-ST-ZIP			6.4 CHY+ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal offect as if made under eath; 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 in Block 12 or Block 13/1 changuit, or on an appear with an address.