


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P07749

1. Entity Name
CHANEL, INC.



Principal Place of Business
**876 CENTENNIAL AVE
 PISCATAWAY, NJ 08855**

Mailing Address
**876 CENTENNIAL AVE
 PISCATAWAY, NJ 08855**

DO NOT WRITE IN THIS SPACE



04262004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-0565120	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.
 9200 SOUTH DADELAND BLVD.
 SUITE 508
 MIAMI, FL 33156-0000**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000156556
 05/05/04-80082-001 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WERTHEIMER, ALAIN 9 WEST 57 STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KOPELMAN, ARIE 9 WEST 57TH STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HEILBRONN, CHARLES 9 WEST 57 STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO MURPHY, MICHAEL F. 9 WEST 57TH STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GANNON, DENNIS 9 WEST 57 STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I 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 report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] Exec. Dir. of Treasury; Tax 4/26/04 (732) 885-5500
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #