2006 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				Apr 25, 2006 08:00 A			
DOCUMENT # P07749 1. Entity Name CHANEL, INC.					Seci	retary of St	ate
Principal Plac 876 CENTEN PISCATAWAY	INIAL AVE	Mailing Address 876 Centennial Ave Piscataway, NJ 08855				TORN BOOM BOOM BORN BORN BORN	
E	OO NOT WRITE I		CE	04062006 4. FEI Number 13-05651 5. Certificate of	No Chg-P	CR2E034 (11/05) Applied Not Ap \$8.75 Addition Fee Required	d For plicable
6. Name and Address of Current Registered Agent UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD. SUITE 508 MIAMI, FL 33156-0000					NOT WI		
the obligated signature.	e named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and titl. E NOWILL FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	i i i i i i i i i i i i i i i i i i i	d Agent signature required	·	in the State of Flor	ida. I am familiar with, and	accept
10. IITLE NAME SIREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP IITLE NAME STREET ADDRESS CITY-SI-ZIP IITLE NAME STREET ADDRESS CITY-SI-ZIP IITLE TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRE D WERTHEIMER, ALAIN 9 WEST 57 STREET NEW YORK, NY D KOPELMAN, ARIE 9 WEST 57TH STREET NEW YORK, NY V HEILBRONN, CHARLES 9 WEST 57 STREET NEW YORK, NY CFO MURPHY, MICHAEL F, 9 WEST 57TH STREET NEW YORK, NY P	ECTORS		-	U0000 05/06/08 NOT W HIS SP		0.00
NAME SIREET ADDRESS City-SI-ZIP	CHIQUET, MAUREEN 9 WEST 57 STREET NEW YORK, NY						

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and if ut 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:

NAME

STREET ADDRESS CITY-ST-ZIP

ELLMER, KENNETH

9 WEST 57 STREET

NEW YORK, NY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR