

**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000005327

**Entity Name:** DELMAR INTERNATIONAL (N.Y.) INC.**Current Principal Place of Business:**39 ST. MARY'S PLACE FREEPORT  
NEW YORK, NY 11520**Current Mailing Address:**39 ST. MARY'S PLACE FREEPORT  
NEW YORK, NY 11520 US**FEI Number:** 11-3197676**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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:** MARIA T. CHAMBERS, SPECIAL ASSISTANT SECRETARY

03/24/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRESIDENT/CEO  
Name BELLO, FRANCIS R.  
Address 39 ST. MARY'S PLACE FREEPORT  
City-State-Zip: NEW YORK NY 11520

Title TREASURER/CFO  
Name HURLEY, BARCLAY  
Address 10636 COTE DE LIESSE  
City-State-Zip: MONTREAL QUEBEC H8T 1A5

Title SECRETARY  
Name CUTLER, PAUL  
Address 10636 COTE DE LIESSE  
City-State-Zip: MONTREAL QUEBEC H8T 1A5

Title VP  
Name HURLEY, BARCLAY  
Address 10636 COTE DE LIESSE  
City-State-Zip: MONTREAL QUEBEC H8T 1A5

Title VP  
Name WAGEN, MICHAEL  
Address 10636 COTE DE LIESSE  
City-State-Zip: MONTREAL QUEBEC H8T 1A5

Title VP  
Name PRICE, GARY  
Address 100 COLVIN WOODS PARKWAY  
STE. 500  
City-State-Zip: TONAWANDA NY 14150

Title VP  
Name CUTLER, PAUL  
Address 10636 COTE DE LIESSE  
City-State-Zip: MONTREAL QUEBEC H8T 1A5

Title CHAIRMAN OF THE BOARD  
Name CUTLER, ROBERT  
Address 10636 COTE DE LIESSE  
City-State-Zip: MONTREAL QUEBEC H8T 1A5

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*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:** BARCLAY HURLEY

TREASURER/CFO

03/24/2025

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                CUTLER, ROBERT  
Address             10636 COTE DE LIESSE  
City-State-Zip:    MONTREAL QUEBEC H8T 1A5

Title                 DIRECTOR  
Name                CUTLER, PAUL  
Address             10636 COTE DE LIESSE  
City-State-Zip:    MONTREAL QUEBEC H8T 1A5

Title                 DIRECTOR  
Name                WAGEN, MICHAEL  
Address             10636 COTE DE LIESSE  
City-State-Zip:    MONTREAL QUEBEC H8T 1A5