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FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 205495

FORM D

PURSUANT TO REGULATION

MAY 1 2003

SEC USE ONLY NOTICE OF SALE OF SECURETIES **Prefix**

Serial

OMB APPROVAL

OMB Number: 3235-0076

Estimated average burden hours per response. . . . 16.00

UNIFO	RM LIMITED OFFERING EXEMPTION	DATE RECEIVED
	nendment and name has changed, and indicate chan nterlace Corporation (formerly known as Panan	
Filing Under (Check box(es) that apply): Type of Filing: ☐ New Filing ☑ A	☐ Rule 504 ☐ Rule 505 ☑ Rule 50 mendment	Section 4(6) ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	issuer	
Name of Issuer (☐ check if th INTERLACE CORPORATION	is is an amendment and name has changed, and ind	icate change.)
Address of Executive Offices 5 Independence Way, 1st Floor, Princeton, 1	(Number and Street, City, State, Zip Code) NJ 08540	Telephone Number (Including Area Code) 609-520-0022
Brief Description of Business		
Marketing, selling and operating an outsource	ed service that uses the Internet to connect client co	ompanies to their suppliers, partners, and customers.
Type of Business Organization		
☑ Corporation	limited partnership, already formed	other (please specify): PROCESSED
□ business trust	☐ limited partnership, to be formed	other (please specify): PRUCESSEL
Actual or Estimated Date of Incorporation of	Month Year Organization: 8 9 9 ☑ Ac	tual
Jurisdiction of Incorporation or Organization		
	CN for Canada, FN for other foreign jurisdict	ion) D E Financial

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States Registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized with the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing parts 	ner of partnership issuers.			
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Inbar, Yaron.			 	
	er and Street, City, State, Zi 08540	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Perold, Etienne				
	er and Street, City, State, Zi 08540	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Parker, John O.				
Business or Residence Address (Number 132 Colfax Road, Skillman, NJ 08558	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Parson, Andrew				
	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Rosenthal, Daniel				
	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Williams, Jack Jr.				
Business or Residence Address (Number 298 Mooringline Dr., Naples, FL 34102	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner.
Full Name (Last name first, if individual) Glore, Jodie				
Business or Residence Address 3141 Dahlia Way, Naples, FL 34105	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner.
Full Name (Last name first, if individual) Itzler, Mark				
	er and Street, City, State, Zi	p Code)		

Check Box(es) that Apply:	J Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner.
Full Name (Last name first, if Ranalli, Robert	individual)				
Business or Residence Address	s (Num	ber and Street, City, State, Zi	p Code)		
2923 Indigobush Way, Naples, FL	,				

					В. П	NFORMAT	TION ABO	UT OFFER	LING		· · · · · · · · · · · · · · · · · · ·		
1.	Has the	e issuer sol	d, or does t	he issuer int	end to sell,	to non-accre	edited inves	tors in this c	offering?			Yes	s No
	Answer also in Appendix, Column 2, if filing under ULOE.									<u> </u>			
2.	What i	s the minir	num investi	ment that wi	ll be accept	ed from any	individual?	?				\$ 12,	500
_												Yes	s No
3.		_	-	it ownership	_		'11 1 '		11 /1	1' 41		X	
4.	commi person list the dealer,	ssion or single to be listed name of the you may s	milar remur d is an assoone broker or set forth the	ciated person dealer. If n information	solicitation n or agent o nore than fi	of purchase f a broker o ve (5) perso	rs in connec r dealer regi ns to be list	tion with sa stered with	les of securi the SEC and	ties in the o Vor with a s	ffering. If a state or states		
Full	l Name ((Last name	first, if ind	ividual)									
Due	inoss or	Pacident /	Address (N)	ımber and S	troot City	State 7in C						<u> </u>	
Dus	siness of	Resident A	Address (1vi	inioer and s	ireet, City, i	state, Zip C	ode)						
Nar	ne of As	ssociated B	roker or De	aler		A110 01							
Stat	tes in W	hich Person	n Listed Ha	s Solicited o	r Intends to	Solicit Pur	chasers						
(Ch	eck "All	l States" or	check indi	vidual States	s)								All States
[] /[]	AL] IL] MT] RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full	l Name (Last name	first, if ind	ividual)					<u> </u>			·	
Bus	siness or	Resident A	Address (Nu	ımber and S	treet, City,	State, Zip C	ode)						
Nar	me of As	ssociated B	roker or De	ealer									
Stat	tes in W	hich Person	n Listed Ha	s Solicited o	r Intends to	Solicit Pur	chasers						
(Ch	eck "All	States" or	check indi	vidual States	s)								All States
[] [N]	AL] IL] MT] RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Ful	l Name ((Last name	first, if ind	ividual)									
Bus	siness or	Resident A	Address (Nu	ımber and S	treet, City,	State, Zip C	ode)						
Nar	me of As	ssociated B	Broker or De	ealer									
Stat	tes in W	hich Perso	n Listed Ha	s Solicited o	r Intends to	Solicit Pur	chasers						
(Ch	neck "Al	l States" or	check indi	vidual States	s)								All States
[] [N	AL] IL] MT] RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPEN	NSES AND USE OF PROC	EED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt \$		\$.	
	Equity \$	550,000.00	\$	250,000.00*
	☐ Common ☑ Preferred (Convertible to Common Stock)			
	Convertible Securities (including warrants) \$		\$	
	Partnership Interests \$	-	\$	
	Other (Specify) \$		\$	
	Total \$	550,000.00	\$	250,000.00*
	Answer also in Appendix, Column 3, if filing under ULOE.		•	
	* plus an option to purchase an additional \$50,000 of Preferred Stock			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".			Aconomic
		Number Investors	•	Aggregate Dollar Amount of Purchases
	Accredited Investors	7	\$.	250,000.00
	Non-accredited Investors	0	\$.	0
	Total (for filings under Rule 504 only)	7	\$.	250,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
3.	If this filing for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of Offering	Type of		Dollar Amount
	Rule 505	Security	\$	Sold
	Regulation A		\$	
	Rule 504		\$ -	
	2000			
	Total		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate			
	Transfer Agent's Fees			\$ -0-
	Printing and Engraving Costs Legal Fees		<u>a</u>	\$ 95.00 \$ 40,000.00
	Accounting Fees		<u> </u>	\$ 1,500.00
	Engineering Fees		□	\$ -0-
	Sales Commissions (specify finders' fees separately) Other Expenses (identify) Blue Sky and other filing fees, postage and related costs			\$ \$ 2,728.00
	Total		Ø	\$ 44,323.00

b. Enter the difference between the aggregatePart C- Questions and total expenses furnished4.a. This difference is the "adjusted gross pro	d in response to Part C - Question					.	303,677
5. Indicate below the amount of the adjusted gro proposed to be used for each of the purposes purpose is not known, furnish an estimate and estimate. The total of the payments listed mu proceeds to the issuer set forth in response to	shown. If the amount for any check the box to the left of the st equal the adjusted gross						
				nyments to Officers, ors, & Affiliates		Pa	nyments To Others
Salaries and fees		0	\$	-0-	О	\$	-0-
Purchase of real estate			\$	-0-	О	\$	-0-
Purchase, rental or leasing and installat	ion of machinery and equipment	0	\$	-0-		\$	-0-
Construction or leasing of plant buildin	gs and facilities	♬	\$	-0-		\$	-0
Acquisition of other businesses (includ in this offering that may be used in exc		_			_		
another issuer pursuant to a merger)		0	\$	-0-	<u> </u>	\$	-0-
Repayment of indebtedness			\$	<u>-0-</u>	0	\$	-0-
Working capital			\$	-0-	☑	\$	505,677
Other (specify)		_	ֆ	-0-		\$	-0-
			\$	-0-	σ	\$	-0
Column Totals			\$	-0-	0	\$	505,677
Total Payments Listed (column totals added)			I	5 \$ 505.	677		
	D. FEDERAL SIGNAT	URE					
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	Signature Z	,		Date 5/10	1/0-	3	
Issuer (Print or Type)	Title of Signer (Print or Type)						
INTERLACE CORPORATION	PRESIDENT AND CHIEF OPER	ATIN	G OFFIC	ER			
Name of Signer (Print or Type)					•		
YARON INBAR							
	ATTENTION						
Intentional misstatements or omissions of		al viol	ations.	(See 18 U.S.C	. 1001.)	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

E. STATE SIGNATURE

Yes	No
	$ \mathbf{V} $

- Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
- \mathbf{V}
- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date	
INTERLACE CORPORATION	Jan 2 5/19/03	
Name (Print or Type)	Title (Print or Type)	
YARON INBAR	PRESIDENT AND CHIEF OPERATING OFFICER	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy of bear typed or printed signatures.

				· · · · · · · · · · · · · · · · · · ·	APPENDIX					
1	Intend	2 l to sell non-	Type of security and aggregate		· -	4		5 Disqualification under State ULOE		
	accre Inves St	edited tors in ate -Item 1)	offering price offered in state (Part C-Item 1)		Type o amount pi (Par		(if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL									1,0	
AK	,									
AZ										
AR										
CA										
со										
СТ										
DE										
DC										
FL			Preferred Stock \$125,000	3	\$125,000				X	
GA										
Ш										
ID										
IL										
IN						_				
IA										
KS										
KY										
LA										
ME										
MD										
MA										

					APPENDIX	4					
1	2 3						5				
	to r accre Inves St	to sell non- edited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
				Number of Accredited		Number of Non-Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
MI											
MN											
MS											
MO											
MT											
NE											
NV											
NH											
NJ		Х	Preferred Stock \$100,000	3	\$100,000				X		
NM											
NY		Х	Preferred Stock \$25,000	1	\$25,000				X		
NC											
ND											
ОН											
OK											
OR											
PA											
RI											
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA											
wv											
WI											
WY											
PR					1						