

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000001919

Entity Name: CURINOS, INC.

Current Principal Place of Business:

485 LEXINGTON AVE 20 FL
NEW YORK, NY 10017

Current Mailing Address:

485 LEXINGTON AVE 20 FL
NEW YORK, NY 10017

FEI Number: 37-1715000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name WOODWARD, CRAIG
Address 485 LEXINGTON AVE 20 FL
City-State-Zip: NEW YORK NY 10017

Title CONTROLLER
Name LYONS, ANDREW
Address 485 LEXINGTON AVE 20 FL
City-State-Zip: NEW YORK NY 10017

Title SENIOR VICE PRESIDENT
Name CADOGAN, JANET P
Address 485 LEXINGTON AVE 20 FL
City-State-Zip: NEW YORK NY 10017

Title VICE PRESIDENT OF TAX
Name LEVINE, MARC
Address 301 N CATTLEMEN ROAD
 301
City-State-Zip: SARASOTA FL 34232

Title TAX DIRECTOR
Name PINZONE, KERI
Address 1983 MARCUS AVENUE
City-State-Zip: LAKE SUCCESS NY 11042

Title SECRETARY
Name PETER, PATRICIA
Address 605 THIRD AVENUE, 22ND FLOOR
City-State-Zip: NEW YORK NY 10158

Title DIRECTOR
Name CONSTANTINIDES, ANDREAS
Address 485 LEXINGTON AVENUE
 20TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR
Name FERRARINI, SERGIO P
Address 485 LEXINGTON AVE
 20TH FLOOR
City-State-Zip: NEW YORK NY 10017

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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: JANET P CADOGAN

SENIOR VICE PRESIDENT 04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHIEF ADMINISTRATIVE OFFICER

Name CREAGH, BARBARA

Address 485 LEXINGTON AVENUE
20TH FLOOR

City-State-Zip: NEW YORK NY 10017