


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 08:00 AM
Secretary of State

DOCUMENT # F95000000388	
1. Entity Name GRIFFTEL MANAGEMENT, INC.	

Principal Place of Business 130 SOUTH EL CAMINO DR. BEVERLY HILLS, CA 90212	Mailing Address 130 SOUTH EL CAMINO DR. BEVERLY HILLS, CA 90212
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01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-3758190	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE, FL 32301	DO NOT WRITE IN THIS SPACE
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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, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GRIFFIN, MERV 130 SOUTH EL CAMINO DR. BEVERLY HILLS, CA 90212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHEN, LAWRENCE 130 SOUTH EL CAMINO DR. BEVERLY HILLS, CA 90212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS REDLICH, GLORIA 130 SOUTH EL CAMINO DR. BEVERLY HILLS, CA 90212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT EYRE, MICHAEL 130 SOUTH EL CAMINO DR. BEVERLY HILLS, CA 90212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000255458
03/08/05-80016-002 150.00

DO NOT WRITE IN THIS SPACE

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:  DATE: 3/3/05 DAYTIME PHONE #: (310) 385-2700