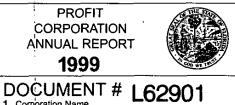
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90069 040 ***150.00

C.R.	C.R. CURRERI ASSOCIATES, INC.						
	, ,						
Principal	I Place of Business	Mailing Address		7-1	-{		
	•						
	SE 111TH WAY 1060 SE 111TH WAY FL 33324 DAVIE FL 33324						
1	1				DO NOT WRITE IN THE	S SPACE	
					3. Date Incorporated or Qualifed		
3 0	is a Discourse Decision of	2a Mailing Addeson			04/05/1990 4. FEI Number	1 400	olied For
	pal Place of Business 2a. Mailing Address				65-0186228	⊢	Applicable
21 Suite	26			***************************************		\$8.75 A	
22	27				5. Certificate of Status Desired	Fee Rec	
	& State City & State				6. Election Campaign Financing	\$5.00	May Be
23	[28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Countr	У	8. This corporation owes the current year l		
24	25	29 3	10		Personal Property Tax.		□No
	9. Name and Address of Current	nt Registered Agent	8-	1 Name	10. Name and Address of New Registere	a Agent	
	MITTELBERG, BARRY S.		ľ	Name			
	7300 W. MCNAB ROAD, SUITE 215		82	2 Street Addre	ess (P.O. Box Number is Not Acceptable)		}
	TAMARAC FL 33321		83	3			
	1						
		•	84	4 City	F	85 Zip C	ode
11. Purs	suant to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	the abov	ve-named corpo			registered
offic	e or registered agent, or both, in the State	of Florida. Such change was aut	horized by	y the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as reg	jistered
J		AUG. 15 01, COOLOT 007,0000, 1 10110		.			
SIGNAT	Signature, typed or printed name of registered age	ant and title if applicable. (NOTE: R	tegistered Age	ent signature required			
12.	·	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	CURRERI, CHARLES R.		1.2 NAME	1			Į.
STREET ADD	! DAVIE EL			ET ADDRESS			1
CITY-ST-ZIF	P. DAVIE FL			ľ	,		
TITLE		□ DELETE	1.4 C/TY-	ST-ZIP		Change	Addition
	ST	DELETE	1.4 C/TY-: 2.1 T/TLE	ST-ZIP	·	☐ Change	Addition
NAME	ST CURRERI, MICHELE M.	DELETE	1.4 C/TY- 2.1 T/TLE 2.2 NAME	ST-ZIP		Change	Addition
STREET ADD	ST CURRERI, MICHELE M. 1060 SW 111TH WAY	DELETE	2.1 TITLE 2.2 NAME 2.3 STREE	ST-ZIP ET ADDRESS		Change	☐ Addition
	CURRERI, MICHELE M. 1060 SW 111TH WAY	☐ DELETE	1.4 C/TY- 2.1 T/TLE 2.2 NAME	ST-ZIP ET ADDRESS -ST-ZIP	- 1	☐ Change	Addition Addition
STREET ADO	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL		1.4 C/TY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 C/TY-	ST-ZIP ET ADDRESS -ST-ZIP	- :- :- :- :- :- :- :- :- :- :- :- :- :-	, ar	
STREET ADD CITY-ST-ZIF TITLE	ST CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL V CURRERI, MARIE		1.4 C/TY-2.1 TITLE 2.2 NAME 2.3 STREE 2.4 C/TY- 3.1 TITLE 3.2 NAME	ST-ZIP ET ADDRESS -ST-ZIP		, ar	
STREET ADO CITY-ST-ZIF TITLE NAME	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL V CURRERI, MARIE 1060 SW 111TH WAY		1.4 C/TY-2.1 TITLE 2.2 NAME 2.3 STREE 2.4 C/TY- 3.1 TITLE 3.2 NAME	ST-ZIP ET ADDRESS .ST-ZIP		, ar	
STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL V CURRERI, MARIE 1060 SW 111TH WAY		1.4 C/TY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 C/TY- 3.1 TITLE 3.2 NAME 3.3 STREE	ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP		, ar	
STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL V CURRERI, MARIE 1060 SW 111TH WAY	☐ DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY-	ST-ZIP ET ADDRESS .ST-ZIP ET ADDRESS .ST-ZIP	- · · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL CURRERI, MARIE 1060 SW 111TH WAY DAVIE FL	☐ DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ST-ZIP ET ADDRESS .ST-ZIP ET ADDRESS .ST-ZIP		Change	☐ Addition
STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL CURRERI, MARIE 1060 SW 111TH WAY DAVIE FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ST-ZIP		Change	Addition
STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL CURRERI, MARIE 1060 SW 111TH WAY DAVIE FL	☐ DELETE	1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE	ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		Change	☐ Addition
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STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF	CURRERI, MICHELE M. 1060 SW 111TH WAY DAVIE FL V CURRERI, MARIE 1060 SW 111TH WAY DAVIE FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.5 STREE 5.4 CITY-	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		Change	Addition Addition
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.