FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P94000014814 (5) **DOCUMENT #** 1. Corporation Name **CURRELI MANAGEMENT, INC.**

Principal Place of Business Mailing Address				.e serif deret 11911 etest 19191 11914 9191 (88)	
18141 SW 70TH PLACE 18141 SW 70TH PLA FT. LAUDERDALE FL 33331 FT. LAUDERDALE FL					
				3. Date Incorporated or Qualifie 02/23/1994	3a. Date of Last Report 10/13/1995
 Principal Pla 	ace of Business	2a. Mailing Address		4. FET Number 65-0480051	Applied For Not Applicable
Suite, Apt. #, etc.		Suite Apt. #, etc 27		5. Certificate of Status Desired	¢0.75
City & State		Oity & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30	Florida Statutes 🔲 '	for intangible tax under s. 199.032, Yes. No
	9. Name and Address of Current	registered Agent	81 Name	10. Name and Address of Ne	w Registered Agent
I OTT O	EODGE I		[Name	Alan Curreli	
LOTT, GEORGE J % LOTT & LEVINE				82 Street Address (P.O. Box Number is Not Acceptable)	
			18	141 SW 70 PL	and the state of t
	INSET DR., SUITE 302		83		
MIAMI FI	L 33143		84 City		■■ 85 Zip Çode
			 	TLAND	FL 33331
SIGNATURE	Man la	meli	58 * * * * * * * * * * * * * * * * * * *	7	purpose of changing its registered office appointment as registered agent. I am
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1 1 TIFEE		☐ Change ☐ Addition
NAME	CURRELI, ALAN		1.2 NAME		
STREET ADDRESS	18141 SW 70TH PLACE		1.3 STREET ADDRESS		
CITY - ST - ZIP	FT. LAUDERDALE FL 33331		14 CITY IST ZIP		
TITLE	DTS	[]] DELFIE	2 1 TITLE		Change Addition
NAME	CURRELI, CHERYL		2.2 NAME		
STREET ADDRESS	18141 SW 70TH PLACE		2.3 STREET ADDRESS		
City-St-ZiP	FT. LAUDERDALE FL 33331		24011-S1-74P		
TITLE		DELETE	3 1 THEF		Change Chaddition
NAM!			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIF		FT 00.00	3.4.0(1Y - S1 - Z)F		
TIFLE		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 1 71fté		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZIP		F3 Mer	4.4.C(FY-S1-Z)F		
TITLE		DELETE	5 1 TATLE		Change Addition
NAME.			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			■ 6.4.0H ≤ 01.200		
TITLE		T be to	5.4 CHY-ST ZIF	·	
		☐ DELETE	6 1 TITLE		Change Addition
1		☐ DELETE.	6 1 TITLE 6 2 NAME		Change Addition
NAME STREET ACORESS		☐ DELETE.	6 1 TITLE		Change Addition
STREET ACORESS CITY - ST-ZIP	y certify that the information correlated w	☐ DELETE.	6 1 TITLE 6 2 NAME		Change Addition

I do hereby certify that the information supplied with this fling is vokinitarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental airman report is true and accorded and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the copy rather or this receive or inside empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 if countries on an attachness with an address.

SIGNATURE: _

Alan Curreli

7/1/96

Daytra, Phone #