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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 21 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CITY-ST-7IP

DOCUMENT # P94000014814 (5)

CURRELI MANAGEMENT, INC.

Principal Plac	ce of Business	Mailing Address				i ventium inn fairt bibli datte abtet udeilt dat itt start geben fathe eine den			
18141 SW 701 FT. LAUDERD		18141 SW 70TH PLACE FT. LAUDERDALE FL 33331-1833							
						3. Date Incorporated or Qualified 02/23/1994		e of Last <b>5/1996</b>	
2. Principal F	Place of Business	28. Mailing Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4. FEI Number 65-0480051		<del>-</del>	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			:	5. Certificate of Status Desired			Additional Required
City & Sta	te	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zφ	Country	Zip		intry		8. This corporation has liability for i			s. 199.032,
24	25 9. Name and Address of Curren	29 Agent	30	Τ		Florida Statutes  10. Name and Address of New Reg	Yes		
CI I	RRELL ALAN	i negleteren waen		81	Name	10. Maille and ways on the trans the	1.010100 7	guin	
	141 SW 70 PL				- A	70.0			
	75 SUNSET DR., SUITE 302			82	Street Addr	ess (P.O. Box Number is Not Acceptab	(B)		
	MI FL 33143			63					
			İ	84	Crty		FI	85 Zij	p Code
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Stat	tutes, the al	bove	-named corp	oration submits this statement for the pion's board of directors. I hereby accep	rpose of	changing	its registered
office or agent. Fa	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change wa ations of, Section 607.0505,	s authorize Florida Stat	a by tutes.	the corporati	ion's board or directors, I hereby accep	t the appo	iniment a	as registered
SIGNATURE									
40	Signature, typed or printed name of registered age OFFICERS AND	The second secon	OTE: Registered	d Agen	nt signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE EDC AND	DIRECTO	DC IN 12
<b>12.</b>	OFFICERS AND	DELETE	1.1 Ti	TLF	<del></del>	ADDITIONS/CHANGES TO OFFIC		Change	
NAME	CURRELI, ALAN		1.2 N/		}		•		
STREET ADDRESS	18141 SW 70TH PLACE		1.3 ST	TREET A	ADDRESS				
GITY-S1-ZIP	FT. LAUDERDALE FL 33331		1.4 0	ITY-ST	1-ZIP				
DITAE	DTS	☐ DELETE	2.1 71	TLE				Change	Addition
NAME	CURRELI, CHERYL		22 N	AME					
STREET ADDRESS	18141 SW 70TH PLACE		2.3 \$1	TAEET #	address				
CITY+ST-ZIP	FT. LAUDERDALE FL 33331	I locuese		HTY - \$1	T- ZIP				Tall Arrest
Julf E		☐ DELETE	3.1 TI				ı	Change	e [_] Addition
NAME Project Appropries			3.2 N/		4000000				
STREET ADDRESS	į			ikee i a Xiyasi	ADDRESS				
CITY-SI-ZIP TITLE		DELETE	4.1 TI		,-2F			Change	Addition
NAME			4.2 N		]		•		
STREET ADDRESS	}				ADDRESS				
CITY - S1 - ZIP			4.4 CI	ITY-ST	1-ZIP				
TITLE		DELETE	5.1 T/	TLE				Change	e 🔲 Addition
NAME			52 N	AME					
STREET ADDRESS	ļ		5351	TREET A	address				
CITY - \$1 - ZIP				ITY-ST	T-ZIP			<u> </u>	
TITLE		☐ DELETE	6.1 T(		İ			Change	e 🔲 Addition
NAME	<b>\</b>		6.2 N/						
STREET ADDRESS			6.3 \$1	TREET A	address				

14. I do 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.