

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

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Mar 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 276462 (9)
1. Corporation Name
HILLSBORO MILE TOWER, INC.

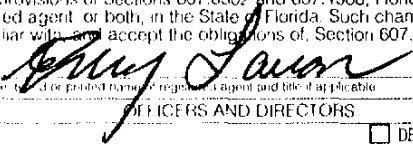


Principal Place of Business 1280 S.W. 36TH AVENUE SUITE 301 POMPANO BEACH FL 33069 US	Mailing Address 1280 S.W. 36TH AVENUE SUITE 301 POMPANO BEACH FL 33069-4868 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 12/13/1963	3a. Date of Last Report 03/05/1996	4. FEI Number 59-1098407	Applied For Not Applicable
		5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required		
		6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees		
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

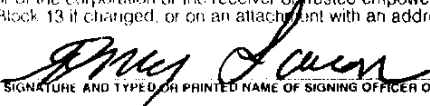
g. Name and Address of Current Registered Agent DORIS TUTTLE 1280 S.W. 36TH AVENUE SUITE 301 POMPANO BEACH FL 33062	10. Name and Address of New Registered Agent 81 Name Emery Larson 82 Street Address (P.O. Box Number is Not Acceptable) 1280 S.W. 36th Ave. #301 83 84 City Pompano Beach FL 85 Zip Code 33069
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE:  DATE: 2/20/97
(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP D PETTY, MARIE 1035 HILLSBORO MILE HILLSBORO BEACH F	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☐ Change ☐ Addition
2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TD MILLER, VERNON R. 1035 HILLSBORO MILE HILLSBORO BEACH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP TD Veitch, Donald 1035 Hillsboro Mile Hillsboro Beach, FL ☐ Change ☒ Addition
3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP SD MORTON, MARY 1035 HILLSBORO MILE POMPANO BEACH FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP SD Moore, Thomas 1035 Hillsboro Mile Hillsboro Beach, FL ☐ Change ☒ Addition
4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP VP HALL, DENNIS 1035 HILLSBORO MILE HILLSBORO BEACH FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☐ Addition
5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP P MILLER, VERNON 1035 HILLSBORO MILE POMPANO BEACH FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☐ Addition
6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP P LARSON, EMERY 1035 HILLSBORO MILE HILLSBORO BEACH FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 3.3.97 500002103915 -03/04/97--01075--045 ***165.00 ☐ Change ☐ Addition

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.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/97 954/969-1330
Date Daytime Phone #

CR2E034 (9/96)