

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714449

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: INTERNATIONAL TOWERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1400 S W 27TH AVENUE #707  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

1400 S W 27TH AVENUE #707  
MIAMI, FL 33145

**New Mailing Address:**

FEI Number: 59-1236029

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BERGSON, JEROME B  
1400 SW 27 AVE  
#701  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: MAZPULE, LEYLA  
Address: 1400 SW 27TH AVE #506  
City-St-Zip: MIAMI, FL 33145

Title: T ( ) Delete  
Name: BERGSUN, JEROME B  
Address: 1400 SW 27TH AVE #704  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: JESTER, MARGARET  
Address: 1400 SW 27TH AVE #504  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: CRESPO, OSVALDO  
Address: 1400 SW 27TH AVE #303  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: RAMOS, ENA  
Address: 1400 SW 27TH AVE #501  
City-St-Zip: MIAMI, FL 33143

Title: P ( ) Delete  
Name: TORRES DE ALBA, ALBERTO  
Address: 1400 SW 27TH AVE #706  
City-St-Zip: MIAMI, FL 33145

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TORRES DE ALBA, ALBERTO

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date