

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90469 001 ***150.00

UNIFORM
AV

DOCUMENT # **M78276**

1. Entity Name
WINSTON TOWERS 1988, INC.



Principal Place of Business
**C/O RUTHERFORD, MULHALL AND WARGO
2600 N. MILITARY TRAIL 4TH FLOOR
BOCA RATON FL 33431-6348
US**

Mailing Address
**C/O RUTHERFORD, MULHALL AND WARGO
2600 N. MILITARY TRAIL 4TH FLOOR
BOCA RATON FL 33431-6348
US**



2. Principal Place of Business
C/O Law Office of Jay Steven ~~Levine~~ *Levine, P.A.*

3. Mailing Address

Suite, Apt. #, etc.
2500 N. Military Trail, Suite 490

Suite, Apt. #, etc.
2500 N. Military Trail, Suite 490

CHECK HERE IF MAKING CHANGES

City & State
Boca Raton, FL

City & State
Boca Raton, FL

4. FEI Number **65-0051390**

Applied For
 Not Applicable

Zip **33431** Country **USA**

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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BURR, ROBERT ESQ
2600 N. MILITARY TRAIL
4TH FLOOR
BOCA RATON FL 33431-6348**

*see change in
Address*

Name **BURR, ROBERT ESQ.**
Street Address (P.O. Box Number is Not Acceptable)
2500 N. Military Trail, Suite 490
City **Boca Raton** FL Zip Code **33431**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Robert B. Bomm*

2-6-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP** Delete
NAME **BLOUIN, MARCEL**
STREET ADDRESS **2600 N. MILITARY TRAIL 4TH FLOOR**
CITY-ST-ZIP **BOCA RATON FL 33431-6348**

TITLE **VP** Change Addition
NAME **Blovin, Marcel**
STREET ADDRESS **2500 N. Military Trail, Suite 490**
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **PD** Delete
NAME **DUTIL, MARCEL**
STREET ADDRESS **2600 N. MILITARY TRAIL 4TH FLOOR**
CITY-ST-ZIP **BOCA RATON FL 33431-6348**

TITLE **PD** Change Addition
NAME **Dutil Marcel**
STREET ADDRESS **2500 N. Military Trail, Suite 490**
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **SD** Delete
NAME **DUTIL, ANNE-MARIE**
STREET ADDRESS **P O BOX 283**
CITY-ST-ZIP **ROCKWOOD ME 04478-0283**

TITLE **SD** Change Addition
NAME **Dutil, Anne Marie**
STREET ADDRESS **311 Kenaston Avenue**
CITY-ST-ZIP **Town of Mount Royal**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **Quebec, Canada**
STREET ADDRESS **H3R 1M7**
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anne-Marie Dutil* **REQUI Anne-Marie Dutil**

Feb. 20. 03 514-344-3551

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)