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

FILED May 10, 1999 8:00 am

CORPORATION	FEORIDA DEPARTI		Secretary of State			
ANNUAL REPORT	Secretary of State		05-10-1999 9028	4 014 ***150.0	0	
1999						
DOCUMENT # Pasoo	00/07/029		7			
Corporation Name						
TAMIAMI TOWER	CORP.					
Principal Place of Business	Mailing Address		7			
3191 CORAL WAY			DO NOT WRITE IN THE	CONCE		
# 805			3. Date Incorporated or Qualified	STACE		
MIAMI 71.33145 2. Principal Place of Business			8/11/95			
2. Principal Place of Business 21 4840 5 W 80 4 5 t. Suite, Apt. #, etc.	2a. Mailing Address 26 4840 5W	POESt.	4. FEI Number 65-06/7007	Applied I Not Appl	_	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	\dashv	
23 MiAmi 71.	28 MIAMI	<i>+1.</i>	Trust Fund Contribution	Added to Fees		
Zip Country 24 33/43 25 U.S.A.	Zip 29 3 3 / 4 3 30	Country USA	This corporation owes the current year Property Tax.	r Intangible Persona Yes No	ie	
9. Name and Address of Current		1	10. Name and Address of New Register			
0:1 - 5	<u> </u>	81 Name		<u> </u>		
RICHARD FrIEND	4 10/	82 Street Add	ress (P.O. Box Number is Not Acceptable)	.l. m . —		
5975 Sunset DR.		83 S 9 7	5 SUNSET DR	# 805		
South MiAmi 71.3	33 143	84 City Sou	H Miami F	85 Zip Code	/ 2	
11. Pursuant to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute			rpose of changing in	ts	
registered office or registered agent, or both, in as registered agent. I am familiar with, and acco	the State of Florida. Such cha ept the obligations of, Section (nge was authorized b 607.0505, Florida Sta	by the corporation's poard of directors. I nerectives.	by accept the appoin	ıtment	
SIGNATURE			The state of the s		,	
Signature, typed or printed name of register 12. OFFICERS AND D		(NOTE: Registered A	Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	DATE D DIRECTORS IN 1	12	
TITLE DIRECTOR	DELETE	11 11115			Addition 3	
NAME PACSELL A DA	4515	1.2 NAME	RUSSELL A. DASIS	,		
STREET ADDRESS 3/9/ CORAL WI CITY-ST-ZIP MIAM; 7/.	4y. #805		4840 SW 80 EST.			
CITY-ST-ZIP MIAM! 71.		l 1	MIAM; 71. 331	<u> </u>		
TITLE DIRECTOR	, DELETE	2.1 TITLE	ALAN H. POTAMKIN	Change /	Addition C	
NAME ALAN H. POTAMK. STREET ADDRESS 3191 CORAL CUM	100 # 80.5	2.2 NAME 2.3 STREET ADDRESS 5	4675 SW 74 5 JT.			
CITY-ST-ZIP MIAMI 71.	733/45	2.4 CITY - ST - ZIP	MIAMI 71. 33143	}		
TITLE DIRECTOR O La	DELETE				Addition	
10.6001 M $E0.741$	MKIN -	3.2 NAME	Robert M. Potamkin 1675 Sw742 St.			
STREET ADDRESS 3/9/ CORAL WA	y # 800	3.3 STREET ADDRESS 4	1675 SW 74 - 35.		- 1	
CITY-ST-ZIP MIAMI +1.3	3/95		MIAMI 71. 3314		4.160	
TITLE NAME	DELETE	4.1 TITLE 4.2 NAME		Change /	Addition	
STREET ADDRESS		4.3 STREET ADDRESS				
CITY - ST - ZIP		4.4 CITY - ST - ZIP				
TITLE	DELETE	5.1 TITLE		Change	Addition	
NAME	_	5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY - ST - ZIP		5.4 CITY - ST - ZIP			A 1.700	
TITLE	DELETE	6.1 TITLE		Change/	Addition	
NAME STREET ADDRESS		6.2 NAME 6.3 STREET ADDRESS				
CITY - ST - ZIP		6.4 CITY - ST - ZIP				
	h this filing does not qualify for	<u> </u>	d in Section 119.07(3)(i), Florida Statutes, I fu	1)		

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 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 ecciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 33 if changed, if on an attachment with an address, with all other like empowered.

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-		_		16	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

365-667-6900 Daytime Phone #