

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714449

**FILED**  
**Mar 17, 2017**  
**Secretary of State**  
**CC8643032088**

**Entity Name:** INTERNATIONAL TOWERS ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number: 59-1236029**

**Certificate of Status Desired: No**

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

NUNEZ, FAUSTINO SR.  
1400 S W 27TH AVENUE  
#707  
MIAMI, FL 33145 US

*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: FAUSTINO NUNEZ, SR**

**03/17/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            NUNEZ, FAUSTINO SR.  
Address        1400 S W 27TH AVENUE  
                  707  
City-State-Zip: MIAMI FL 33145

Title            VP  
Name            DE ALBA, ALBERTO SR.  
Address        1400 SW 27 AVENUE  
                  707  
City-State-Zip: MIAMI FL 33145

Title            TREASURER  
Name            LOZANO, NAHIROBY MS.  
Address        1400 S W 27TH AVENUE  
                  707  
City-State-Zip: MIAMI FL 33145

Title            DIRECTOR  
Name            VARGAS, IVAN SR.  
Address        1400 SW 27 AVE  
                  707  
City-State-Zip: MIAMI FL 33145

Title            SECRETARY  
Name            GALDO, ISABEL MRS.  
Address        1400 SW 27 AVE.  
                  707  
City-State-Zip: MIAMI FL 33145

Title            DIRECTOR  
Name            PERTIERRA, GEMMA MRS.  
Address        1400 SW 27 AVE  
                  # 707  
City-State-Zip: MIAMI FL 33145

*I hereby 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 all other like empowered.*

**SIGNATURE: FAUSTINO NUNEZ**

**PRESIDENT**

**03/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date