**FILED** 

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90098 005 \*\*\*158.75

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

12/22/1975

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

Mailing Address

2424 N FED HWY

**BOCA RATON FL 33431** 

SUITE 311

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 492942 1. Corporation Name

Principal Place of Business

2424 N FED HWY SUITE 311

**BOCA RATON FL 33431** 

TOWER FUNDING, INC.

Suite, Apt. #, etc.  Suite, Ap	2. Principal Pl	ace of Business	2a. Mailin	g Address				4. FEI Number		Ap	plied For
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   27	آ		26					59-1655781	/	No	t Applicable
City & State  Ci	Suite, Apt.	#, etc.		Apt. #, etc.					<b>b</b> /	\$8.75	Additional
City & State  State Incorporation closes the current year intangible  Personal Property in City City City City City City City City	9		27					5. Centicate of Status Desired	<b>v</b>	Fee Re	quired
Trust Fun Contribution  Added to Foes     2p	City & State	9		k State				6. Election Campaign Financing		<sup></sup> \$5.00	May Be
S. Triac proportion owes the current year intanglies   S. Name and Address of Current Registered Agent   S. Name and Address of New Registered Agent   S. Name and Address of New Registered Agent   S. Name and Address of New Registered Agent   S. Triac proportion owes the current year intanglies   Personal Proporty Tax.   Yes	3		28					Trust Fund Contribution	Ш	Added t	o Fees
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  85 Street Address (P.O. Box Number is Not Acceptable)  86 City  87 FL 85 Zip Code  87 City  88 Zip Code  88 Zip Code  88 Zip Code  89 Zip Code  80 Zip Code		Country			Cou	ntry		8. This corporation owes the curr	ent year Int	angible	. /
9. Name and Address of Current Registered Agent  BERNARD DAVID A 2424 N FED HWY, STE 311 BOCA RATON FL 33431  81  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  61  61  61  61  61  61  61  61  61  6	4	25	29		30			Personal Property Tax.		☐Yes	No
BERNARD DAVID A 2424 N FED HWY, STE 311 BOCA RATION FL 33431  82 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Zip Code  86 City  FL 85 Zip Code  86 City  FL 85 Zip Code  87 Zip Code  88 City  FL 85 Zip Code  88 City  FL 85 Zip Code  89 Zip Code  90 Zip Cod		9. Name and Address of Curren	Registered	Agent				10. Name and Address of New I	Registered	Agent	
2424 N FED HWY, STE 311 BOCA RATON FL 33431  83 84 City FL 85 Zip Code  F1. 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 and butter of the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's accept the appointment as registered of the appointment as registered of the corporation's accept the appointment as registered of the appointment as registered as registered of the appointment as registered as a registered accept the appointment as registered of the appointment as registered of the appointment as registered as a point as a point as a						81	Name				
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Signature, typed or printed name of registered applications. (NOTE Registered Applications). (	agent. I a	m familiar with, and accept the obligat	ions of, Section	on 607.0505, Flor	ida Stati	utes.					
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64 CITY-ST-ZIP	1	A			6.3 S	TREET	ADDRESS				
14. 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 of supplied ental 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in											
indicated on this annual report of 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	CITY-ST-ZIP	ertify that the information supplied wi	th this filing do	not qualify for	the exe	mptic	on stated in Se	ection 119.07(3)(i), Florida Statutes.	I further cer	tify that the	information
officer or director of the corporation of the receiver or trustee employered to execute this report as required by Chapter bur, Frontia Statutes, and that my name appears in	indicated	on this annual report of supplemental	annual report	is true and accu	rate and	that	my signature	shall have the same legal effect as	f made und	er oath; that	I am an
Block 12 or Block 13 if changed <b>At chair</b> attachment with an address, with all other like empowered.	officer or Block 12	or Block 13 if changed A call attact	iver or trus <b>je</b> e hment with an	empowered to e address, with all	xecute ti I other lil	nis re ke en	port as requirenced.	ed by Chapter 607, Florida Statutes	, and triat II	у наше арр	DGI D III

SIGNATURE:

SIGNING OFFICER OR DIRECTOR