FILE NOW: FILING FEE IS \$61.25

FILED NONPROFIT Apr 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS POCUMENT # 730478 (5) TOWER 1800 CONDOMINIUM, INC. Principal Place of Business Mailing Address 1800 COLLINS AVENUE 1800 COLLINS AVENUE 3. Date Incorporated or Qualified MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 08/19/1974 4. FEI Number Applied For 59-1706911 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional П 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 22 27 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? X Yes 🔲 No 23 28 Zip Country Zιρ Country 8. This corporation owes or has paid the current year intengible Yes 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALVAREZ, ARMANDO Street Address (P.O. Box Number is Not Acceptable) 82 **1800 COLLINS AVENUE** 83 MIAMI BEACH FL 33139 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. 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 was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registers 3 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS DELETE 1.1 TITLE Change ☐ Addition TITLE ALVAREZ, ARMANDO 1.2 NAME NAME 1800 COLUNS AVE. 17-B STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME VALLE, JULIA 2.2 NAME 1800 COLLINS AVE., 3-J STREET ADDRESS 23 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE DEL SOL, ENEIRA 3.2 NAME MALA 1800 COLLINS AV., #6-F STREET ADDRESS 3.3 STREET ADDRESS MIAMI BCH. FL CITY-ST-ZIP 3 4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition FIGUEROA, RAUL NAME 4. 2 NAME 1800 COLLINS AVE. #5-A STREET ADDRESS 4.3 STREET ADDRESS MIAMI BCH. FL. CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE CONDE, BERTILA 5.2 NAME NAME 1800 COLLINS AVE. #19-G 5.3 STREET ADDRESS STREET ADORESS MIAMI BCH. FL 5.4 CITY-ST-ZIP

CITY-ST-ZIP MIAMI BCH. FL

14. I hereby certify that the information supplied with this filing dose 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 receiver or prustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address

6.3 STREET ADDRESS

6.1 TITLE

62 NAME

DELETE

SIGNATURE:

GONZALES, AYDA

1800 COLLINS AVE. #9-F

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

ALVAREZ, MARÍO 1800 COLLÍNS AVE. #60

305-594-666

Addition