FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 APR 18 PM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000004534 (3)**

1. Corporation Name
THE LAS OLAS TOWER COMPANY, INC.

Principal Place of Business
737 MALAGA AVENUE
CORAL GABLES FL 33134

Mailing Address
737 MALAGA AVENUE
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/31/1994**
3a. Date of Last Report:

2. Principal Place of Business
21 1700 E LAS OLAS
22 PENTHOUSE II
23 FT. LAUDERDALE, FLA.
24 33301
25 USA

2a. Mailing Address
26 SAME
27
28
29
30

4. FEI Number: **APPLIED FOR** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, STE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. 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 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 607.0505, Florida Statutes.

SIGNATURE (Signature required when name of registered agent is changed) (NOTE: Registered Agent signature required when reinstated) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VDT LONG, SUSAN 737 MALAGA AVENUE CORAL GABLES FL	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	☒ Change ☐ Addition VICE PRESIDENT SUSAN LONG 1700 E. LAS OLAS FT. LAUDERDALE, FLA 33301
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PSD LONG, PHILIP D 737 MALAGA AVENUE CORAL GABLES FL	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	☒ Change ☐ Addition PRESIDENT PHIL LONG 1700 E. LAS OLAS BLVD FT. LAUDERDALE, FLA 33301
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		31 TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY ST ZIP		TITLE / NAME / 64 STREET ADDRESS / 64 CITY ST ZIP	☐ Change ☐ Addition

OVERLOOKED YOUR INSTRUCTIONS ON # 12 - SEND ANOTHER APP. IF NECESSARY. THANKS

14. I do hereby certify that the information contained with this filing is voluntarily furnished and 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: PHIL LONG 12 APR 95 305 522 4688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0190062 CP