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FILED

Feb 06 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002120 (2)

1. Corporation Name:

CHURCH & TOWER FIBER TEL, INC.



Principal Place of Business:

5555 OAKBROOK DRIVE STE. 620
NORCROSS GA 30093-2270

Mailing Address:

8800 NW 36TH STREET
8TH FLOOR
MIAMI FL 33166-6648
US

3. Date Incorporated or Qualified

05/01/1995

3a. Date of Last Report

04/24/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 3155 N.W. 77th Ave.

27 Suite, Apt. #, etc.

28 Miami FL.

29 Zip

30 Country

4. FEI Number

58-2137241

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☒

No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME PERERA, ISMAEL
STREET ADDRESS 8800 NW 36TH STREET
CITY-ST-ZIP MIAMI FL 33166☐ DELETETITLE VTD
NAME VALDES, CARLOS A
STREET ADDRESS 8800 NW 36TH STREET
CITY-ST-ZIP MIAMI FL 33166☐ DELETETITLE S
NAME DAMON, NANCY
STREET ADDRESS 8800 NW 36TH STREET
CITY-ST-ZIP MIAMI FL 33166☐ DELETETITLE EV
NAME GRUNO, ROBERT B
STREET ADDRESS 5555 OAKBROOK PARKWAY SUITE 620
CITY-ST-ZIP NORCROSS GA☐ DELETETITLE AT
NAME OLSON, LINDA
STREET ADDRESS 5555 OAKBROOK PARKWAY STE. 62
CITY-ST-ZIP NORCROSS GA 30093-2270☒ DELETETITLE COB
NAME MAS, JORGE
STREET ADDRESS 8800 NW 36TH STREET
CITY-ST-ZIP MIAMI FL 33166☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3155 N.W. 77th Ave
Miami FL 33122

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3155 NW 77th Ave
Miami, FL 33122

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

3155 NW 77th Ave.
Miami FL 33122

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

VD

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

3155 NW 77th Ave
Miami, FL 33122

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nancy J. Damon

Date

Daytime Phone #

1-9-97

305-599-1800

CR2E034 (9/96)