

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

FILED

**May 13 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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 3155 NW 77TH AVE MIAMI FL 33122 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Zip 29
	Country 30

3. Date Incorporated or Qualified 05/01/1995	
4. FEI Number 58-2137241	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	PERERA, ISMAEL	
STREET ADDRESS	8600 NW 36TH STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	VALDES, CARLOS A	
STREET ADDRESS	8600 NW 36TH STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	S	<input type="checkbox"/> DELETE
NAME	DAMON, NANCY	
STREET ADDRESS	8600 NW 36TH STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	EV	<input type="checkbox"/> DELETE
NAME	GRUNO, ROBERT B	
STREET ADDRESS	5555 OAKBROOK PARKWAY SUITE 620	
CITY-ST-ZIP	NORCROSS GA	
TITLE	COB	<input type="checkbox"/> DELETE
NAME	MAS, JORGE	
STREET ADDRESS	8600 NW 36TH STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	3155 NW 77th Avenue
14 CITY-ST-ZIP	Miami, FL 33122
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	3155 NW 77th Avenue
24 CITY-ST-ZIP	Miami, FL 33122
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	3155 NW 77th Avenue
34 CITY-ST-ZIP	Miami, FL 33122
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	Director
53 STREET ADDRESS	3155 NW 77th Avenue
54 CITY-ST-ZIP	Miami, FL 33122
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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 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 _____

CR2E034 (10/97)