

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J64686** (5)

1. Corporation Name

SILICON EAST TOWER COMPANY



Principal Place of Business

**1775 W. HIBISCUS BLVD. STE 301
MELBOURNE FL 32901**

Mailing Address

**1775 W. HIBISCUS BLVD. STE 301
MELBOURNE FL 32901**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**LIEFF, ANN S
1666 NW 82 AVE.
MIAMI FL 33126**

3. Date Incorporated or Qualified

03/31/1987

3a. Date of Last Report

04/04/1995

4. FEI Number

59-2806282

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

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 of Registered Agent (if being changed, include the signature of the outgoing agent)

Signature of Registered Agent (if being changed, include the signature of the outgoing agent)

Date

Date

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

**D
HESS, GARY
3021 CEDAR TRACE
TARPON SPRINGS FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

**D
TAPLINGER, SYLVAN
5555 COLLINS AVE
MIAMI BEACH FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

**D
SPECTOR, MARTIN
1570 S. DIXIE HWY
CORAL GABLES FL**

TITLE

NAME

STREET ADDRESS

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