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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # K41924**

1. Corporation Name

TOWER 40, INC.

FILED
Jan 27, 1999 8:00am
Secretary of State

01-27-1999 90018 011 ***150.00



				-	
incipal Place of Business	Mailing Address		33	•	
	4100 COLLINS AVE	•		IIS SPACE	
COLLINS AVE			DO NOT WRITE IN THIS SPACE		
FICE AMI BEACH FL 33140	MIAMI BEACH FL 33140		3. Date Incorporated or Qualifed		}
ham benon 12 days	US	÷	10/28/1988		
· .	<u></u>		4. FEI Number	Applied	
Principal Place of Business	2a. Mailing Address	•	65-0083969	Not Ap	
- Filicipal Fidoo of Joseph	26			\$8.75 Addit	
	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Require	ed
Suite, Apt. #, etc.	27		, Eigening	\$5.00 May	Be
L	City & State		6. Election Campaign Financing	Added to Fe	
City & State	⊢ ·	·	Trust Fund Contribution		
<u> </u>		Country	8. This corporation owes the current year	r Intangible ☐ Yes ☑1	No.
Zip Country	<u> </u>		Personal Property Tax.		
25	(29)		10. Name and Address of New Registe	rea Agent	
9. Name and Address o	of Current Registered Agent	81 Name			٠.
	and the state of t	1 - 1	has in Not Acceptable)		
DEUTSCH, SEYMOUR		82 Street Add	dress (P.O. Box Number is Not Acceptable)		<u></u>
4100 COLLINS AVE		<u> </u>			
MIAMI BEACH FL 33140		83		ile <u>iller. Etilkeli</u>	\$181, [58]
WININI DENOTITE OF THE	•	84 City	the state of the s	85 Zip Cod	le"
	•	84 City	·	FL	rictored
17. Pursuant to the provisions of Sections office or registered agent, or both, in agent. I am familiar with, and accept	the obligations of, Section 607,0303, 7151	,00			
agent. I am familiar with, and accept	the obligations of, Section 607.0303, 7101	,00			
agent. I am familiar with, and accept	the obligations of, Section 607.0303, Figure 4 september 2019 and the if applicable. (NOTE:	ida Statutes. Registered Agent signature required.		TE RS AND DIRECTORS	3 IN 12
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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 119.07(3)(i), Florida Statutes, i further 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 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 on the same legal effect as if made under oath; that I am an 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, with all other like empowered.

SIGNATURE: SEY WOURD OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR