


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2005 08:00 AM
Secretary of State

DOCUMENT # L75776
 1. Entity Name
RIO TOWERS, INC.



Principal Place of Business Mailing Address
 1699 CORAL WAY / STE - 302 1699 CORAL WAY / STE - 302
 MIAMI, FL 33145 US MIAMI, FL 33145 US

DO NOT WRITE IN THIS SPACE



01252005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0234322 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 RODRIGUEZ-TEJERA, ANITA TEJON
 1699 CORAL WAY / STE - 302
 MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00


9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS RODRIGUEZ-TEJERA, ANITA TEJON 1699 CORAL WAY / STE - 302 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, JESSELYN 1331 NW 50 ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALMEIDA, FLORENTINO 641 W FLAGLER ST. 3RD FL MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000225901
 02/11/05-80058-013 158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Anita Rodriguez** 2/3 / 05 (305) 856-2547
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #