


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L75776

1. Entity Name
RIO TOWERS, INC.



FILED
Sep 11, 2008 08:00 AM
Secretary of State

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

Mailing Address
1699 CORAL WAY / STE - 302
MIAMI, FL 33145 US



06052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0234322

Applied For
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 \$550.00
Due by September 12, 2008

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

10. OFFICERS AND DIRECTORS

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

DO NOT WRITE IN THIS SPACE

U00000359499
09/11/08-80004-004-558.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ **6/16/08** **305-856-2547 EXT. 109**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #