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

**PROFIT** CORPORATION ANNUAL REPORT 1999

DOCUMENT # L95201



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90051 011 \*\*\*150.00

CHURCH & TOWER, INC.										
·	· · · · · · · · · · · · · · · · · · ·	A 4 9:- A J J								
Principal Place of Business Mailing Address								-		
3155 NW 77TH AVE #150 3155 NW 77TH AVE #150 MIAMI FL 33122 MIAMI FL 33122					1					
US US				DO NOT WRITE II			IN THIS	THIS SPACE		
					ĺ	3. Date Incorporated or Qualifed			{	
						08/22/1990				
Principal Place of Business     2a. Mailing Address						4. FEI Number			plied For	
21 26						65-02279 <u>79</u>		\$8.75	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired	<b></b>	Fee Re		
City & State City & State						6. Election Campaign Financing	<del></del>	\$5.00	May Be	
28			<u> </u>			Trust Fund Contribution Added to Fees				
Zip	Country Zip					8. This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax.		☐Yes	No	
		I		10. Name and Address of New Rec	istered /	Agent				
COD	DODATION CEDUICE COMPANY		81	Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET			82	Street A	Addres	ss (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301			83				_			
			84	City				85 Zip (	Code	
•							FL		i	
office of p	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	it Florida. Such change was aut	tnonzea by	the corpor	corpora ration's	ation submits this statement for the pu s board of directors. I hereby accept t	rpose of he appoir	changing its itment as re	registered gistered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Age	nt signature re	quired w	hen reinstating)	DATE	· <del>- · ·</del>	<del></del>	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	ERS AN	D DIRECTO	RS IN 12	
TITLE	D DELETE			1.1 TITLE			<u> </u>	☐ Change	Addition	
NAME	MAS, JORGE			1.2 NAME				•		
STREET ADDRESS	ss 3155 NW 77TH AVE		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP						
TITLE	√D . □ DELETE 2.11		2.1 TITLE	Ì	,			☐ Change	☐ Addition {	
NAME	MAS, JUAN CARLOS 2		2.2 NAME	2.2 NAME					į	
STREET ADDRESS	ss 3155 NW 77TH AVE			T ADDRESS					ļ	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-5	2. 4 CITY-ST-ZIP				<del></del> _		
TITLE	<b>-</b> ■		3.1 TITLE					Change	☐ Addition	
NAME	Inno, soce reamois		3.2 NAME						ł	
STREET ADDRESS	0.00 (1.1 1.1 1.1 1.2		3.3 STREE	TADORESS					Ì	
CITY-ST-ZIP			_	3.4. CITY-ST-ZIP			_	<b>□</b> Cb	Addition	
TITLE	•		4.1 TITLE					Change		
NAME	DAMON, NANCY J			4. 2 NAME						
STREET ADDRESS	,		i	TADDRESS				•		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				☐ Change	Addition	
TITLE		DELETE 5.11			<b>Y</b>	v Carnen Sabater			EJ AUGUUNI	
NAME	<b>!</b> .		5.2 NAME		SISS NW 17+4 Avenue				Í	
STREET ADDRESS	351		1							
CITY-ST-ZIP	<u></u>		5.4 CITY+S 6.1 TITLE	11-ZIP		ami FL 33122		[] Change	☐ Addition	
TITLE	,							change		
NAME	l		6.2 NAME							

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 appearment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

LIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)555-1800