FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

5-1-95 B-5

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M55026 (2)

1. Corporation Name

TOWERS D-502, INC.

Principal Place of Business	Mailing Address
C/O ISABEL BERNAL 550 OCEAN DRIVE APT. 2-F KEY BISCAYNE FL 33149	C/O ISABEL BERNAL 550 OCEAN DRIVE APT. 2-F KEY BISCAYNE FL 33149

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/02/1987

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21: 550 OCEAN DRIVE
Suite, Apt. #, etc.
22: APT 7-F
City & State
23:
Zip
24:
Country
25:

2a. Mailing Address
26: 550 OCEAN DRIVE
Suite, Apt. #, etc.
27: APT 7-F
City & State
28:
Zip
29:
Country
30:

4. FEI Number: 59-2836598 ☐ 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

9. Name and Address of Current Registered Agent

BERNAL, ISABEL
550 OCEAN DRIVE
APT. 7-F
KEY BISCAYNE FL 33149

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
(If changing registered agent, typed name of registered agent and title if applicable) (Registered Agent's signature if registered agent is changing) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	BERNAL, ISABEL	12 NAME	
STREET ADDRESS	550 OCEAN DRIVE APT 7-F	13 STREET ADDRESS	
CITY ST ZIP	KEY BISCAYNE FL	14 CITY ST ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	BERNAL, J. MARTIN	22 NAME	
STREET ADDRESS	CALLE 87 #12-22 APT. 601	23 STREET ADDRESS	
CITY ST ZIP	BOGOTA COLUMBIA	24 CITY ST ZIP	
TITLE	T	31 TITLE	☒ Change ☐ Addition
NAME	BERNAL, J. RICARDO	32 NAME	BERNAL, J. RICARDO
STREET ADDRESS	DIAGONAL 109 #11A-14 APT. 901	33 STREET ADDRESS	
CITY ST ZIP	BOGOTA COLUMBIA	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	BERNAL, MARTHA URIBE	42 NAME	
STREET ADDRESS	550 OCEAN DRIVE APT 2-F	43 STREET ADDRESS	
CITY ST ZIP	KEY BISCAYNE FL	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 attachment with an address.

SIGNATURE: X [signature] 4/25/95 X 372-5085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

010201A CP