2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071147

Entity Name: HIGHTOWER PROPERTY MANAGEMENT CORPORATION

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
9999 NE 2ND AVENUE				9999 NE 2ND AVENUE		
302 MIAMI SHORES, FL 33138				305 MIAMI SHORES, FL 33138		
Current Mailing Address:				New Mailing Address:		
P.O. BOX MIAMI SH	531145 ORES, FL 33	3153				
FEI Number	: 20-2843909	FEI Number Applied For()	FEI Number Not	Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name	and Address of	New Registered Agent:	
MARTINEZ, JULIO E MR. 9999 NE 2ND AVENUE 302				MARTINEZ, JULIO E MR. 9999 NE 2ND AVENUE 305		
MIAMI SHORES, FL 33138 US				MIAMI SHORES, FL 33138 US		
	e named entit e of Florida.	y submits this statement for the p	ourpose of changi	ing its registered	office or registered agent, or both,	
SIGNATURE: JULIO MARTINEZ				04/30/2009		
	Electro	onic Signature of Registered Age	ent		Date	
Election Ca	mpaign Financi	ing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MARTINEZ, J P.O. BOX 53		Title: Name: Address: City-St-Z	` :) Change () Addition	
Title: Name: Address: City-St-Zip:	GROSSO, M/ P.O. BOX 53		Title: Name: Address: City-St-Z	:) Change () Addition	
Title: Name: Address: City-St-Zip:	MARTINEZ, J P.O. BOX 53		Title: Name: Address: City-St-Z	:) Change () Addition	
Title: Name: Address: City-St-Zip:	ss: P.O. BOX 531145		Title: Name: Address: City-St-Z	:) Change ()Addition	
Title: Name: Address:	D (DIAZ, ENEME PO BOX 531		Title: Name: Address:	,) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JULIO MARTINEZ PRES 04/30/2009

City-St-Zip: MIAMI, FL 33153