2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000136939

Entity Name: L. TOWER I. INC.

Name:

Address: City-St-Zip: RUBIO, MAURICIO

1111 CRANDON BLVD SPT A-106

KEY BISCAYNE, FL 33149

FILED Jun 11, 2009 Secretary of State

Littly Nan	ie. L. 100	VER I, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
200 S BISCAYNE BLVD SUITE 2730 MIAMI, FL 33131			1111 CRAI KEY BISCA	1111 CRANDON BLVD., APT. A-106 KEY BISCAYNE, FL 33149		
Current Ma	ailing Add	ress:	New Maili	New Mailing Address:		
200 S BISCAYNE BLVD SUITE 2730 MIAMI, FL 33131				1111 CRANDON BLVD., APT. A-106 KEY BISCAYNE, FL 33149		
FEI Number:	20-5858606	FEI Number Applied For ()	FEI Number Not App	icable () Certificate of Status Desired ()	
Name and	Address o	f Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
MIAMI, FL	/SHORE D 33133 L named enti	RIVE 7TH FLOOR IS ty submits this statement for the p	purpose of changing i	ts registered office or registered agent, or	both,	
SIGNATUR						
	e with s. 607 paign Finan	ronic Signature of Registered Ag .193(2)(b), F.S., the corporation did no cing Trust Fund Contribution (). ECTORS:	ot receive the prior notic	Date e. IS/CHANGES TO OFFICERS AND DIREC	CTORS:	
Title: Name: Address: City-St-Zip:	D AREVALO, 3 200 S BISC MIAMI, FL 3	AYNE BLVD SUITE 2730	Title: Name: Address: City-St-Zip:	D (X) Change () Addition COMPEAN, MANUEL 1111 CRANDON BLVD., APT. A-106 KEY BISCAYNE, FL 33149		
Title: Name: Address: City-St-Zip:		() Delete MANUEL DON BLVD SPT A-106 YNE, FL 33149	Title: Name: Address: City-St-Zip:	D (X) Change () Addition RUBIO, MAURICIO 1111 CRANDON BLVD., APT. A-106 KEY BISCAYNE, FL 33149		
Title:	D	(X) Delete	Title:	() 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MAURICIO RUBIO D 06/11/2009