FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 8:57

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P92000005385 (9)

1. Corporation Name

GOLD TOWER, INC.

Principal Place of Business	Mailing Address
16150 NE 12TH AVE N. MIAMI BEACH FL 33162	16150 NE 12TH AVE N. MIAMI BEACH FL 33162

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/17/1992

3a. Date of Last Report: 04/20/1994

2. Principal Office: 21 9110 PALOMINO DRIVE; 22 Suite, Apt #, etc.: ; 23 City & State: LAKE WORTH FL; 24 Zip: 33467; 25 Country:

2a. Mailing Address: 26 9110 PALOMINO DRIVE; 27 Suite, Apt #, etc.: ; 28 City & State: LAKE WORTH FL; 29 Zip: 33467; 30 Country:

4. FEI Number: 65-0395917 — [ ] 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	10. Name and Address of New Registered Agent
TORO, JAIME 16150 NE 12TH AVE. N. MIAMI BEACH FL 33162	81 Name: TORO JAIME 82 Street Address (P.O. Box Number is Not Acceptable): 9110 PALOMINO DRIVE 83 84 City: LAKE WORTH FL 85 Zip Code: 33467

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	TITLE	PD	[✓] Change [ ] Addition
NAME	TORO, JAIME	NAME	TORO JAIME	
STREET ADDRESS	16150 NE 12TH AVE.	STREET ADDRESS	9110 PALOMINO DRIVE	
CITY-ST-ZIP	N. MIAMI BEACH FL 33162	CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	T	TITLE	V.D.	[✓] Change [ ] Addition
NAME	TORO, MAGDA	NAME	TORO MAGDA	
STREET ADDRESS	16150 NE 12TH AVE	STREET ADDRESS	9110 PALOMINO DRIVE	
CITY-ST-ZIP	N MIAMI BEACH FL	CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE		TITLE		[ ] Change [ ] Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE		TITLE		[ ] Change [ ] Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE		TITLE		[ ] Change [ ] Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE		TITLE		[ ] Change [ ] Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		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: Jaime Toro — 4-17-95 — (407) 433-8349

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

0178506 CP