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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200005398 (2)

CARIBBEAN TOWERS, INC.

Principal Place	e of Business	Mailing Address		T 18 OF THE 18 TO SERVE SOUTH BOTTLE BOSTE SOUTH WHEN	\$ 83198
350 ROYAL PALM WAY		C/O ROBERT G GORDON.PR			
7545 E TREASURE DR		350 ROYAL PALM WAY		DO NOT WRITE IN THIS SPACE	
PALM BEACH FL 33480 US		PALM BEACH FL 33480		3. Date Incorporated or Qualified	
				11/13/1992	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0373625	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Suite 403		27 Suite 403			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 Zip	Country	8. This corporation owes or has paid the cur	
24	25	⊢ , ′ ⊢	30		Yes No
241	9. Name and Address of Curre			10. Name and Address of New Registered	Agent
GO	RDON, LEE B.		81 Name		• • •
	ROYAL PALM WAY		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
PALM BEACH FL 33480			OZ CITOGRAGUIN	ess (1.0. Box (10/120) is the mosephasis)	
'~	an berton re octoo		83		
			84 City		85 Zip Code
				<u>FL</u>	
11. Pursuant to	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes e of Florida, Such change was a	s, the above-named corp	oration submits this statement for the purpose of ion's board of directors. I hereby accept the app	changing its registered ointment as registered
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Flor	ida Statutes.		
SIGNATURE					
	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE. ND DIRECTORS	Registered Agent signature require 13.	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
12.	PVST	DELETE	1.1 TITLE	ADDITIONS/OFFACED TO OTT TO DETO ACC	☐ Change ☐ Addition
NAME	GORDON, ROBERT G		12 NAME		_ •
STREET ADDRESS	350 ROYAL PALM WAY		1,3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL 33480		1.4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	GORDON, ROBERT G		2.2 NAME		
STREET ADDRESS	350 ROYAL PALM WAY		2.3 STREET ADDRESS		
CITY ST-ZIP	PALM BEACH FL 33480		2. 4 CITY-ST-ZIP		11
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3,4. CITY-ST-ZIP		1 Change I Addition
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4,3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZiP		Change Addition
TITLE		DELETE	5.1 TITLE		T Grange T Augilion
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DETE LE	6.1 TITLE		Grange Roundon
NAME			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS					

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 expowered 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 a produce of the corporation of the receiver of trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

kobert J. Gordon

1/21/98

561/833-4000

FILED

Jan 30 1998 8:00am

Secretary of State