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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 11 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500001717 (4)

SUNDRIFT TOWERS, INC.

Principal Prace of Business

3181 HALLANDALE BEACH BLVD. HALLANDALE FL		3181 HALLANDALE BE HALLANDALE FL 3300						
					3. Date Incorporated or Qualified 01/09/1995	3a. Date 05/01/		eport
	Place of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26					ot Applicable	
Suite, Apt. #, etc.		<u></u> 1	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22 City & Sta		City & State					Fee Re	'
23	iit:	28			Election Campaign Financing Trust Fund Contribution	П	\$5.00	
Zip	Country	Z(p Country			Trust Fund Contribution			
24	25	29	30		Florida Statutes Yes No			
	9. Name and Address of	Current Registered Agent			10. Name and Address of New Reg	platered Age	nt	
FEI	NBERG, JEFFREY		81	Name				
	1 SHERIDAN STREET STE.	300	82	Street Add	ress (P.O. Box Number is Not Acceptable	le)		
HOL	LLYWOOD FL 33021						······································	***
			83		•			
			84	City		FL '	35 Zip (Code
11 Darengo	I to the receiping of Sections 6	07 0502 and 607 1508 Florida S	tatutae the above	named cor	poration submits this statement for the pu		onging it	o rogiotorod
office or	registered agent or both, in the	o State of Florida. Such change of obligations of, Section 607.050	was authorized bu	the cornors	ation's board of directors. I hereby accep	the appoin	ment as	registered
SIGNATURE								
	Signature, typed or profest name of regis	TT	(NOTE: Registered Age	nt signature requ		OATE		
. 12. TiftE	OFFICE	RS AND DIRECTORS	13. E 1.1 TITLE		ADDITIONS/CHANGES TO OFFICE		Change	RS IN 12 Addition
NAME	LAZAUREANU, FLORIAN	, DEECH	1.1 IIILE 1.2 NAME	- 54		L	, បានប្បទ	Munition
STREET ADDRESS	AAAA IIAH ANDALE BEAG	CH RI VO.	1	+DDDCCC				
Offy-ST-ZP	HALLANDALE FL	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.3 STREET					
Tild	D	DELETE	1.4 CITY - S 2.1 TITLE	1-217		<u></u>	Change	Addition
NAME	LAZAUREANU, FLOAREA	-	2.2 NAME	:		-		
STREET ADDRESS	AAAA IIII ANDALE DELE		2.3 STREET	ADDRESS				
City-St-7P	HALLANDALE FL		2. 4 CITY - 9	T-ZIP				
1:ILF		DELETE	E 3.1 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADORESS			3.3 STREET	ADDRESS		-		
CHY ST-ZP			3.4. CITY-5	T-ZIP				
TILE		☐ DELETE	4.1 TITLE				Change	Addition
. NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-S1-7F			4.4 CITY-S	I - ZIP	***************************************		····	
1011		DELETI					Change	Addition
MAME			5.2 NAME					
STEFF LADORESS			5.3 STREET					
CHY-ST 20			5.4 CITY - S	r-ZIP			Ohaces	A delice -
110.6		☐ DELETI					Change	Addition
NAMI			6.2 NAME					
STREET ADORESS			6.3 STREET					
Offy-SI-ZF	1		6.4 City-\$1	[-7iP				

SIGNATURE:

THE PROPERTY OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR DIRECTOR

14. I do 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 arroual 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