**FILED** 

Mar 04, 1999 8:00 am Secretary of State

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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P95000033027						
1. Corporation Name STRONG TOWER CAPITAL CORP.						
STHONG	I TOTTER CAPITAL CONT			1 (40)(44) USB (EXB) EXIC) EXIC) EXIC)	I <b>BB:01</b> ISB <b>00</b> (1111 <b>BB</b> )( <b>B</b> (	
Principal Place of Business Mailing Address						1817 1881 1881
3432 HYDE PARK DR 3432 HYDE PARK DR						
CLEARWATER FL 34621-				DO NOT WRITE IN THIS SPACE		
33761 3376/			161	3. Date Incorporated or Qualifed		
				04/27/1995		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	<u> </u>	lied For
21		26		59-3316667		Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc. 27			5. Certifcate of Status Desired		
	City & State City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		,
Zip ファ r	7/- / Country	Zip 727/ / -	Country	8. This corporation owes the current y	ear Intangible	
24 / )	/6/ 25	<sup>29</sup> <sup>3376</sup> / <sub>3</sub>	30	Personal Property Tax.		<b>∐No</b>
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regis	tered Agent	
GEANAKOS, JOHN T.						
l				ddress (P.O. Box Number is Not Acceptable)	·	
3432 HYDE PARK DR CLEARWATER FL 3 <del>4821</del> 33761			83			_
33741					1 1	
					FL 85 Zip C	ode
l office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligation	of Florida. Such change was aut	horized by the corpor	orporation submits this statement for the purp ration's board of directors. I hereby accept the	ose of changing its appointment as reg	registered jistered
SIGNATURE	and talling that, one doorp the senger			-		1
	Signature, typed or printed name of registered agent		Registered Agent signature rec		ATE	DC IN 12
12.	OFFICERS ANI	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE NAME	GEANAKOS, JOHN T	() DECE IE	1.2 NAME	•		
STREET ADDRESS			1.3 STREET ADDRESS	_		
CITY-ST-ZIP	CLEARWATER FL 34621 33	761	14 CITY-ST-ZIP	33741		
TITLE		☐ DELETE	2.1 TITLE		. Change	Addition
NAME			2.2 NAME			ļ
STREET ADDRESS			2.3 STREET ADDRESS	·		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			Addition
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME	1		3.2 NAME			ļ
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			_ {
STREET ADDRESS			4.3 STREET ADDRESS			j
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME	·		]
STREET ADDRESS			5.3 STREET ADDRESS			\
CITY-ST-ZIP		□ pereze	5.4 CITY-ST-ZIP		Chance	Addition
TITLE		☐ DELETE	6.1 TITLE 6.2 NAME		☐ Change	
NAME	1		■ U.Z I WWIL			

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 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 or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

JOHN T. GEANAKOS, PRESIDENT