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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000014458 (9)

TOWER CONSTRUCTORS & CONSULTANTS, INC.

	Principal Place 390 NW 210TH MIAMI FL 3316	1 STREET	390	ling Address NW 210TH STREET MI FL 33169-2146	- 							
								3. Date Incorp 02/15/19	orated or Qualified	3a. D	ate of Last F	eport
	2. Principal Pl	lace of Business	2a.	Mailing Address				4. FEI Number	47530		}	oplied For ot Applicable
Suite, Apr. #, etc. 22			27	Suite, Apt. #, etc.			5. Certificate o	Status Desired	A	\$8.75 Fee Ro		
	City & State	Q	28	City & State				6. Election Car Trust Fund (npaign Financing Contribution		\$5.00 Added	May Be to Fees
	Ζιρ 24	Country 25	29	Zip	30 Co	untry		8. This corpora Florida Statu	ition has liability for lites		e tax under s	. 199.032,
1		9. Name and Address of Curi	rent Registe	ered Agent				10. Name and	Address of New Re	gistered	Agent	
	RUE	BIN, ANDREW S				81	Name					
		25 NW 2ND AVENUE STE 305 MI FL 33169	5			82	Street Ac	ddress (P.O. Box Num	ber is Not Acceptat	ole)		
						83						
						84	City			FL	_ '	Code
	11. Pursuant office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Stanifamiliar with, and accept the ob-	502 and 60 ate of Florida	7,1508, Florida Statu a Such change was	tes, the a	above ed by	named c	orporation submits thi oration's board of direct	s statement for the potors. I hereby accep	ourpose o pt the ap	of changing i pointment as	ls registered registered
	}	и папшаг мат, ало ассерт ме ор	ilgations of,	Section 607.0303, Fr	UIIQA SK	110168	٠.					
	SIGNATURE	Signature: typed or printed name of registered	agent and title if	applicable (NO	TE: Register	ed Age	nt signature re	equired when reinstating)		DATE		
	12.	OFFICERS A	AND DIRECT		13.			ADDITIONS/0	CHANGES TO OFFIC	CERS AN		
	TITLE	D Kelley, Patricia L		DELETE		TITLE	į,	HENRY N	1 1-11-	V c	Change	Addition
	NAME CTOST AND DECC	390 NW 210TH STREET			1.2			HE.NEI W	4 KPIIE		Λ.	
	STREET ADDRESS						ADDDCCC	VEW C	,	71	.,,	
	1				1.3	STREET		SAME	. 1,-11-	710	*,*	
	City - St - ZIP	MIAMI FL 33169	······································	DELETE	1.3 t 1.4 t	STREET CITY-S		SAMÉ SAMÉ	,-,,-	713		Addition
	Titte		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	☐ DELETE	1.3 t 1.4 t 2.1	STREET CITY-S TITLE		SAME			Change	Addition
	TITLE NAME			☐ DEFE1E	1.3 : 1.4 (2.3 2.2 (STREET CITY-S TITLE NAME	T-ZIP	SAME				Addilion
	Titte			☐ DELETE	1.31 1.41 2.3 2.2 2.3	STREET CITY-S TITLE NAME	T-ZIP	SAME	•		☐ Change	Addition
	THTLE NAME STREET ADDRESS.			☐ DELETE	1.33 1.44 2.3 2.21 2.33 2.4	STREET CITY-S TITLE NAME STREET	T-ZIP	SAME			☐ Change	Addition Addition
	TITLE NAME STREET ADDRESS. CITY - ST - ZIP				1.33 1.40 2.5 2.21 2.33 2.4 3.17	STREET DITY-S TITLE NAME STREET CITY-S	T-ZIP	SAME	•		☐ Change	
	TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE				1.33 1.40 2.3 2.2 2.33 2.44 3.17 3.21	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME	T-ZIP	SAME	•		☐ Change	
	TITLE NAME STREET ADDRESS CITY - \$1 - ZIP TITLE NAME			□ DELFTE	1.3.1 1.4(2.1) 2.2 2.3 2.4 3.1 3.2 3.3	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME	ADDRESS ST-ZIP ADDRESS	SAME	•		☐ Change	Addition
	THEF NAME SHREEL ADDRESS GITY - ST-ZIP HILE NAME STREEL ADDRESS				1.33 1.44 2.1 2.2 2.33 2.4 3.1 3.2 3.3 3.4	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS ST-ZIP ADDRESS	SAME	•		☐ Change	
	THEF NAME SIRIEFI ADDRESS CITY - ST-ZIP THEE NAME STREET ADDRESS CITY - ST-ZIP			□ DELFTE	1.33 1.44 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREEY CITY-S CITY-S	ADDRESS ST-ZIP ADDRESS	SAME	•		☐ Change	Addition
	THEF NAME STREET ADDRESS CITY - ST-ZIP THEE NAME STREET ADDRESS CITY - ST-ZIP THEE			□ DELFTE	1.33 1.41 2.3 2.2 2.33 2.44 3.1 3.2 3.3 3.4 4.1 4.2	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE	ADDRESS ST-ZIP ADDRESS	SAME	•		☐ Change	Addition
	THEF NAME STREET ADDRESS CITY - ST - ZIP THEF NAME STREET ADDRESS CITY - ST - ZIP THEF NAME STREET ADDRESS CITY - ST - ZIP			☐ DELETE	1.33 1.41 2.5 2.2 2.33 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4	STREET CITY-S TITLE NAME STREET TITLE NAME STREET NAME NAME STREET NAME STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	SAME	•		☐ Change ☐ Change ☐ Change	Addition Addition
	THEF NAME STREET ADDRESS CITY-SI-ZIP THEE NAME STREET ADDRESS CITY-SI-ZIP HILLE NAME STREET ADDRESS CITY-SI-ZIP THEE			□ DELFTE	1.33 1.41 2.5 2.2 2.33 2.4 3.1 3.2 4.1 4.2 4.3 4.4 5.1	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME STREET NAME STREET NAME STREET NAME STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	SAME	•		☐ Change	Addition
	THEF NAME STREET ADDRESS CITY - ST - ZIP THEE NAME STREET ADDRESS CITY - ST - ZIP HILLE NAME STREET ADDRESS CITY - ST - ZIP THEE NAME			☐ DELETE	1.33 1.41 2.15 2.21 2.33 2.4 3.17 3.21 3.3 3.4 4.17 4.2 4.33 4.41 5.11 5.21	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME STREET NAME NAME STREET NAME NAME NAME NAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	SAME	•		☐ Change ☐ Change ☐ Change	Addition Addition
	THEF NAME STREET ADDRESS CITY - ST - ZIP TOLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS STREET ADDRESS			☐ DELETE	1.33 1.41 2.3 2.2 2.3 2.4 3.1 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3	STREET COTY-S TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	SAME	•		☐ Change ☐ Change ☐ Change	Addition Addition
	THEF NAME STREET ADDRESS CITY - ST - ZIP THEF NAME STREET ADDRESS CITY - ST - ZIP THEF NAME STREET ADDRESS CITY - ST - ZIP THEF NAME STREET ADDRESS CITY - ST - ZIP THEF NAME STREET ADDRESS CITY - ST - ZIP			DELETE DELETE	1.33 1.41 2.3 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.4	STREET COTY-S TITLE NAME STREET COTY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET COTY-S TITLE NAME COTY-S TITLE NAME COTY-S TITLE NAME COTY-S TITLE NAME COTY-S TITLE COTY-S TITLE COTY-S TITLE	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	SAME	•		☐ Change ☐ Change ☐ Change	Addition
	THEF NAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS CITY-ST-ZIP TOLE MAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS C-TY-ST-ZIP TOLE			☐ DELETE	1.33 1.41 2.3 2.2 2.4 3.1 3.3 3.4 4.1 4.2 4.3 5.1 5.2 5.3 5.4 6.1	STREET TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME STREET NAME STREET CITY-S TITLE NAME STREET TITLE NAME TITLE NAME TITLE NAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	SAME	•		☐ Change ☐ Change ☐ Change	Addition Addition
	THEE NAME SHREEL ADDRESS CITY-SE-ZIP TOLE NAME SHREEL ADDRESS CITY-SE-ZIP THEE NAME STREEL ADDRESS CITY-SE-ZIP THEE NAME STREEL ADDRESS CITY-SE-ZIP THEE NAME			DELETE DELETE	1.33 1.41 2.1 2.2 2.33 2.4 3.1 3.3 3.4 4.1 4.2 4.3 5.1 5.2 5.3 5.4 6.1 6.2	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE NAME CITY-S TITLE NAME NAME NAME NAME NAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	SAME	•		☐ Change ☐ Change ☐ Change	Addition
	THEF NAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS CITY-ST-ZIP TOLE MAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS CITY-ST-ZIP TOLE NAME STREET ADDRESS C-TY-ST-ZIP TOLE			DELETE DELETE	1.33 1.41 2.1 2.2 2.33 2.4 3.1 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.4 6.1 6.2 6.3	STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE NAME CITY-S TITLE NAME NAME NAME NAME NAME	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS	SAME	•		☐ Change ☐ Change ☐ Change	Addition

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 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

SIGNATURE AND TYPED OR PRINTED NAME OF MISSING OFFICER OR MRECTO

4-19-94 305-658-5800

FILED

May 15 1997 8:00am

Secretary of State