

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000065230

Entity Name: PALM & TOWER CORP.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

95 MERRICK WAY  
STE 440  
CORAL GABLES, FL 33134

## Current Mailing Address:

95 MERRICK WAY  
STE 440  
CORAL GABLES, FL 33134

FEI Number: 65-0734891

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## New Principal Place of Business:

2 ALHAMBRA PLAZA  
PH2C  
CORAL GABLES, FL 33134

## New Mailing Address:

2 ALHAMBRA PLAZA  
PH2C  
CORAL GABLES, FL 33134

## Name and Address of Current Registered Agent:

ARRIAGA, CARLOS A  
95 MERRICK WAY  
SUITE 440  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

DE LA CRUZ, LUIS F  
2 ALHAMBRA PLAZA  
PH2C  
CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LUIS F DE LA CRUZ

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: ARRIAGA, CARLOS A  
Address: 95 MERRICK WAY STE 440  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: ARRIAGA, CARLOS A  
Address: 2 ALHAMBRA PLAZA, PH2C  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP ( ) Change (X) Addition  
Name: ARRIAGA, CARLOS A JR  
Address: 2 ALHAMBRA PLAZA, PH2C  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP ( ) Change (X) Addition  
Name: ARRIAGA, ANA M  
Address: 2 ALHAMBRA PLAZA, PH2C  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP ( ) Change (X) Addition  
Name: DE LA CRUZ, GLORIOSA  
Address: 2 ALHAMBRA PLAZA, PH2C  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS A ARRIAGA

PSD

04/29/2005

Electronic Signature of Signing Officer or Director

Date