

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000094121 (6)

1. Corporation Name
TOWER EAGLE COMPUTERS, INC.



Principal Place of Business
2760 W. ATLANTIC BLVD.
SUITE 3, PALM AIRE PLAZA
POMPANO BEACH FL 33069

Mailing Address
2760 W. ATLANTIC BLVD.
SUITE 3, PALM AIRE PLAZA
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 2724 W. ATLANTIC BLVD.
Suite, Apt. #, etc.
22
City & State
23 POMPADNO BEACH, FL
Zip Country
24 33069 25
2a. Mailing Address
26 2724 W. ATLANTIC BLVD.
Suite, Apt. #, etc.
27
City & State
28 POMPADNO BEACH, FL
Zip Country
29 33069 30

3. Date Incorporated or Qualified 11/18/1986
3a. Date of Last Report
4. FEI Number 65-0720845
Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WLMC REGISTERED AGENTS, INC.
701 BRICKELL AVE.
SUITE 2000
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name FELIPE TORREALBA
82 Street Address (P.O. Box Number is Not Acceptable) 6421 MALLARDS LANE
83
84 City COCONUT CREEK FL 85 Zip Code 33073

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* FELIPE TORREALBA/PRESIDENT 07/28/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	TORREALBA, FELIPE	2760 W. ATLANTIC BLVD., SUITE 3	POMPANO BEACH FL 33069	<input type="checkbox"/>
VP	PIETRI, LUIS	2760 W. ATLANTIC BLVD., SUITE 3	POMPANO BEACH FL 33069	<input type="checkbox"/>
STD	PIETRI, LUIS	2760 W. ATLANTIC BLVD., SUITE 3	POMPANO BEACH FL 33069	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	TORREALBA, FELIPE	2724 W. ATLANTIC BLVD.	POMPANO BEACH, FL 33069	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	PIETRI, LUIS	2724 W. ATLANTIC BLVD.	POMPANO BEACH, FL 33069	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STD	PIETRI, LUIS	2724 W. ATLANTIC BLVD.	POMPANO BEACH, FL 33069	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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]* FELIPE TORREALBA/PRESIDENT 07/28/97 105009841966

CR2E034 (4/97)