PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90210 028 ***150.00

DOCUMENT # PO700012048

ALEXANI	DER TOWERS REALTY GRO										
Principal Place	of Business	Mailing Address							•		
3505 S. OCEAN DR., STE .CU-3A 3505 S. OCEAN DR., STE .CU-3A											
HOLLYWOOD FI	L 33019	HOLLYWOOD FL 33019				DO	NOT WRITE	IN THIS S	PACE		
					-	3. Data Incorporated or	Qualifed				1
						02/06/1997			•		l
2 Principal Pl	aça of Business	2a. Mailing Address			-	4. FEI Number		•	A	oplied For	
21 26						59-3427645			N.	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status I	Nocirari			Additional	
22						5. Certificate of Status i	7631 BU	<u> </u>	Fee R	aquired	
City & State		City & State				 Election Campaign F Trust Fund Contribut 		0	•	May Be to Fees	
Zip	Country	Zlp	Count	ry		8. This corporation own		nt year intai	ngible		
24	25	. — :	<u> </u>	مصحت		Personal Property T			Yes —	- <u></u> No	} -
27	9. Name and Address of Currer	11	<u> </u>		1	0. Name and Address	of New Re	gistered A	gent		1
			Ε	1 Name							
	EVEZ, AIDA		}_	2 Street	Address	(P.O. Box Number is N	ot Acceptab	le)			İ
3505 S. OCEAN DR., STE .CU-3A			Ľ	2 01000	, 140.000	(V					
HOLI	LYWOOD FL 33019		٤	3	-	•					
			-	4 City					85 ZIp	Code	
}			I -					<u>FL</u>	1 1 1		
11. Pursuant i	to the provisions of Sections 607.050 agistered agent, or both, in the State m familiar with, and accept the prings	2 and 607.1508, Florida Statutes of Florida, Such change was auti 1966s of Section 607.0505, Florid	i, the abo horized to la Statut	ve-named or by the corpo	corporar oration's	board of directors. I he	eby accept	the appoint	ment as re	gistered	
SIGNATURE	Jula lot	erec					ź	4171	199		_ ا
SIGNATURE	Signature, typed or printed name of regisleged page	note: R	tegistered A	pent alignatura n		en reinsteting)	3	DATE			(86
SIGNATURE	Signature, typed or printed name of registered page OFFICERS &	AD-DIRECTOR	tegistered A	pent algnatura n	required wh	en reinstating) ADDITIONS/CHANGI	S TO OFFI	DATE CERS AND	DIRECTO		11/98)
SIGNATURE 12.	Signature, typed or printed name of registered age OFFICERS No.	note: R	13.	pent algnatura n	equired wh	en reinstating) ADDITIONS/CHANGE TEVEZ, A	S TO OFFI	DATE CERS AND	DIRECTO	ORS IN 12	(11/98)
SIGNATURE 12. TITLE NAME	Signature, typed or primed name of registron per OFFICERS AND DP ESTEVEZ, AIDA	AD-DIRECTOR	13.	gent signatura n E	ES 100	ADDITIONS/CHANGE TEVEZ, A	ES TO OFFI	CERS AND	DIRECTO	ORS IN 12	E034 (11/98)
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14. 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP