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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000075239

1. Corporation Name
BROADCAST TOWER LEASING, INC.

Principal Place of Business
 120 BARBADOS AVE.
 TAMPA FL 33606

Mailing Address
 120 BARBADOS AVE.
 TAMPA FL 33606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/26/1998

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 4830 W. Kennedy Blvd.	26 4830 W. Kennedy Blvd.	59-3531793	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 Suite 340B	27 Suite 340B	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 Tampa, FL	28 Tampa, FL	Trust Fund Contribution	<input type="checkbox"/>
Zip	Zip	Country	Country
24 33609	29 33609	30 USA	31 USA

9. Name and Address of Current Registered Agent
NETZER, EVIN L ESQ.
 1 BARNETT PLAZA, 101 E. KENNEDY BLVD.
 STE. 3200
 TAMPA FL 33602

10. Name and Address of New Registered Agent
 81 Name
Wm. Todd Lax, Esq.
 82 Street Address (P.O. Box Number is Not Acceptable)
4830 W. Kennedy Blvd.
 83
Suite 340B
 84 City
Tampa FL 85 Zip Code
33609

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]* DATE: **1/22/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	J. Kevin Barile
STREET ADDRESS		1.3 STREET ADDRESS	4830 W. Kennedy Blvd., Suite 340B
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Tampa, FL 33609
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

SIGNATURE: **J. Kevin Barile** SIGNATURE REQUIRED DATE: **1/22/99** BYTIME PHONE #: **813-258-2588**

CR25034 (11/98)