


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000089783 1. Entity Name HIALEAH TOWER, INC.	
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Principal Place of Business 8510 N.W. 56TH STREET MIAMI, FL 33166	Mailing Address 8510 N.W. 56TH STREET MIAMI, FL 33166
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DO NOT WRITE IN THIS SPACE



01182006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0969574	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FERDIE, AINSLEE
 717 PONCE DE LEON BLVD.
 STE 215
 CORAL GABLES, FL 33134

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	STEWART, JACK H
STREET ADDRESS	8510 N.W. 56TH STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	D
NAME	ASKOWITZ, GERALD
STREET ADDRESS	8510 N.W. 56TH STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	D
NAME	STEWART, DONNA J
STREET ADDRESS	8510 N.W. 56TH STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	D
NAME	ASKOWITZ, BONNIE
STREET ADDRESS	8510 N.W. 56TH STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/25/06-80047-025 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____  _____

Date: 1/19/06
 Daytime Phone #: 305 592 791

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR