2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 706865

Entity Name: TOWER EAST INCORPORATED

FILED May 06, 2015 **Secretary of State** CC5843176171

Current Principal Place of Business:

1150 EUCLID AVENUE,

APT. # 107

MIAMI BEACH, FL 33139

Current Mailing Address:

1150 EUCLID AVE.

APT, 107

MIAMI BEACH, FL 33139

FEI Number: 59-1235709 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIAMI BEACH FL 33139

GORDON, FRAN G 1150 EUCLID AVENUE 212 MIAMI BEACH, FL 33139 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:

City-State-Zip:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PSD** Title Т

Name GORDON, FRAN Name SIERRA, MARIA

1150 EUCLID AVE APT 212 1150 EUCLID AVENUE APT. 204 Address Address

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title **OFFICER** Title **OFFICER**

COCCOTELLI, LORENSO Name VAN ROSENTHAL, MADELEINE Name

1150 EUCLID AVENUE, Address 1150 EUCLID AVENUE, Address APT. # 107 APT. # 107

City-State-Zip: MIAMI BEACH FL 33139

Title **OFFICER** Title **OFFICER**

Name CARTER, ANDREW Name ALKANEYA, MONICA

1150 EUCLID AVENUE, Address 1150 EUCLID AVENUE, Address

APT. # 107 APT. # 107

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title **OFFICER** Title **OFFICER**

Name VAN ROSENTHAL, MADELEINE Name SANDERS, CAM

1150 EUCLID AVENUE, Address 1150 EUCLID AVENUE, Address

APT. # 107 APT. # 107

MIAMI BEACH FL 33139 City-State-Zip: City-State-Zip: MIAMI BEACH FL 33139

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

05/06/2015 SIGNATURE: GORDON, FRAN Ρ

Date

Officer/Director Detail Continued:

Title **OFFICER** Title **OFFICER**

Name COCCOTELLI, LORENSO Name ALKANEYA, MONICA 1150 EUCLID AVENUE, Address 1150 EUCLID AVENUE, Address

APT. # 107 APT. # 107

MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip:

OFFICER Title Title **OFFICER**

CARTER, ANDREW Name SANDERS, CAM Name

1150 EUCLID AVENUE, 1150 EUCLID AVENUE, Address Address APT. # 107

APT. # 107

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139