


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # 844811
 1. Entity Name
TOWER PERFORMANCE, INC.



Principal Place of Business 23 VREELAND ROAD FLORHAM PARK, NJ 07932	Mailing Address 23 VREELAND ROAD FLORHAM PARK, NJ 07932
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 22-1753716	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE, FL 32301

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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)
 Signature: typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LATTANZIO, JOSEPH 23 VREELAND ROAD FLORHAM PARK, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FOSTER, FRANK 4031 BROADWAY, STE 105 HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEPALMA, ANTHONY 23 VREELAND ROAD FLORHAM PARK, NJ
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/09/07-80059-026 150.00

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph Lattanzio **Joseph Lattanzio** 1/4/07 973 966-1116
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/line Phone #