

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003941

FILED
Jun 21, 2004
Secretary of State

Entity Name: TOWER CONTRACTING CORP.

Current Principal Place of Business:

16623 NE 19 AVENUE
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

16623 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

16623 NE 19 AVENUE
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

16623 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 33162

FEI Number: 04-2548686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, CATHRINE
7219 MARSH TERRACE
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SULLIVAN, CATHRINE
Address: 17148 LIMRICK COURT
City-St-Zip: TEQUESTA, FL

Title: DVP () Delete
Name: SMITH, TIMOTHY H
Address: 7601 E TREASURE DR #PH206
City-St-Zip: MIAMI, FL 33141

Title: S () Delete
Name: MCDONALD, JOSEPH P
Address: 47 RIPLEY ROAD
City-St-Zip: COHASSET, MA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SULLIVAN, CATHRINE
Address: 7219 MARSH TERRACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: DVP (X) Change () Addition
Name: SMITH, TIMOTHY H
Address: 16623 NE 19TH AVE
City-St-Zip: MIAMI, FL 33162

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHRINE SULLIVAN

PD

06/21/2004

Electronic Signature of Signing Officer or Director

Date