

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003941

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: TOWER CONTRACTING CORP.

## Current Principal Place of Business:

16623 NE 19TH AVENUE  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

## Current Mailing Address:

16623 NE 19TH AVENUE  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134

FEI Number: 04-2548686

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## 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:

SKRLD, INC.  
210 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 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: OSCAR R. RIVERA, DIRECTOR

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TIMOTHY SMITH

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date