

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000020051

1. Entity Name
TOWER ELECTRICAL CONSTRUCTION, LLC



Principal Place of Business
6434 N.W. 5TH WAY
FT. LAUDERDALE, FL 33309

Mailing Address
6434 N.W. 5TH WAY
FT. LAUDERDALE, FL 33309



04212004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3758983

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-instating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

U00000133081
04/27/04-80070-012 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HECTOR, F. NORBERT JR
STREET ADDRESS	421 RALEIGH VIEW ROAD
CITY - ST - ZIP	RALEIGH, NC 27610
TITLE	MGR
NAME	SKOLNICK, MICHAEL
STREET ADDRESS	6434 N.W. 5TH WAY
CITY - ST - ZIP	FT. LAUDERDALE, FL 33309
TITLE	MGR
NAME	TURNER, STEPHEN
STREET ADDRESS	6434 N.W. 5TH WAY
CITY - ST - ZIP	FT. LAUDERDALE, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *F. Norbert Hector Jr.*

F. Norbert Hector Jr.

4/20/04

919-835-3655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #