## 2008 LIMITED LIABILITY COMPANY

## FILED Apr 28, 2008 8:00 am Secretary of State

ANNUAL REPURT					Secretary or State			
DOCUMENT # L04000088180  1. Entity Name TOWER PLOS DESCRIPTION						04-28-2008	90054 011 ***1	38.75
TOWER	HOLDINGS, LLC							
Principal Plac	e of Business	Mailing Address	-			<b>60030</b> 6	4 U	
718 W. MLK TAMPA, FL		718 W. MLK BLVD. TAMPA, FL 33603	JS					
					E ABBITABLE BITE	BOTE OLDTY BOTE DOTE OF	II <b>Ceici ic</b> iel iciel iciel (ice) ierii	FRIEST (II) (ES)
2. Principal Place of Business - No P.O. Box # 1702 N. FLORIDA AVE.		3. Mailing Address P.O. BOX 3275						
Suite, Apt.		Suite, Apt. #, etc.			04242008	Chg-LLC	CR2E083 (12/06	3)
City & Stat		City & State TAMPA, FL			4. FEI Numbe 38-3712		<del>  </del> -	Applied For Not Applicable
Zip 33602	Country	Zip 33601	Country USA			of Status Desired	□ \$5.00 A Fee Requi	
	6. Name and Address of Current I	Registered Agent			7. Name and	Address of New R	legistered Agent	
718 W MI K BOLII EVARD				kddress (F	N SOLOMON uss (P.O. Box Number is Not Acceptable)			
SUITE 200 TAMPA, FL 33603			1702	2 N.	FLORID	A AVE.		
			TÄMI				FL Zing	 2
The above named entity submits the statement for the purpose of changing its registered office or registered as the obligations of registered agent.						n, in the State of Flo	orida. I am familiar wit	h, and accept
SIGNATURE MARVIN SOLOMON, MEMBER Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remistating)  OATE							8	
	<del></del>							
	. NOW!!! FEE 10 6400 75					B4-1-		
	: NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75	-					e check payable to a Department of St	
			10.				Department of St	
After May	/ 1, 2008 Fee will be \$538.75  MANAGING MEMBER MGRM		10.			Florida	Department of St	ate
9. TITLE NAME	MANAGING MEMBER MGRM HAMILTON, MICHAEL	RS/MANAGERS	TITLE NAME			Florida	CHANGES	ate
9.	/ 1, 2008 Fee will be \$538.75  MANAGING MEMBER MGRM	RS/MANAGERS	TITLE			Florida	CHANGES	ate
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGRM HAMILTON, MICHAEL 1507 E. 7TH AVENUE	RS/MANAGERS	TITLE NAME STREET ADORESS			Florida	CHANGES	ate
9. IIILE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGRM HAMILTON, MICHAEL 1507 E. 7TH AVENUE TAMPA, FL 33605 MGRM SOLOMON, ROBERT 1507 E. 7TH AVENUE	RS/MANAGERS Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE			Florida	a Department of Sta	ate
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11. 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 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.

Date

SIGNATURE: ROBERT B. SOLOMON SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 513-822-9843