

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90112 016 \*\*\*158.75

**DOCUMENT # M91641**

1. Entity Name

**TOWER ELECTRIC CORP.**

Principal Place of Business

Mailing Address

6846 HIGH RIDGE ROAD  
 LANTANA FL 33462  
 US

6846 HIGH RIDGE ROAD  
 LANTANA FL 33462-4022  
 US

2. Principal Place of Business

3. Mailing Address

*West Palm Beach FL*  
 Suite, Apt. #, etc.  
*6846 High Ridge Rd*

*6846 High Ridge Rd*  
 Suite, Apt. #, etc.  
*LANTANA*

City & State

City & State

*LANTANA FL*

*LANTANA FL*

Zip

Country

Zip

Country

*33462*

*WEST PALM BEACH*

*33462*

*WEST PALM BEACH*



DO NOT WRITE IN THIS SPACE

4. FEI Number

**65-0067825**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHAPEL, LEONARDO**  
**6846 HIGH RIDGE RD**  
**APT. A**  
**LANTANA FL 33462**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

*Leonardo Chapel* *Leonardo Chapel*

*04-15-2000*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>CHAPEL, LEONARDO</b>		NAME	
STREET ADDRESS <b>6846 HIGH RIDGE ROAD</b>		STREET ADDRESS	
CITY-ST-ZIP <b>LANTANA, FL 33462</b>		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>CHAPEL, DIGNA</b>		NAME	
STREET ADDRESS <b>6846 HIGH RIDGE ROAD</b>		STREET ADDRESS	
CITY-ST-ZIP <b>LANTA, FL 33462</b>		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>CHAPEL, JOEL</b>		NAME	
STREET ADDRESS <b>6102 WEST FOLD</b>		STREET ADDRESS	
CITY-ST-ZIP <b>LAKE WORTH, FL 33462</b>		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*04-15-2000*

Date

Daytime Phone #

*(561) 588-7107*