

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2004 8:00 am
Secretary of State

02-06-2004 90048 001 ***150.00
 02-06-2004 90048 002 *****8.75



DOCUMENT # M91641
 1. Entity Name
TOWER ELECTRIC CORP.

Principal Place of Business Mailing Address
 6846 HIGH RIDGE ROAD 6846 HIGH RIDGE ROAD
 LANTANA, FL 33462 US LANTANA, FL 33462 US

2. Principal Place of Business 3. Mailing Address
6846 HIGH RIDGE **6846 HIGH RIDGE RD**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
LANTANA FL **LANTANA FL**
 Zip Country Zip Country
33462 **WEST PALM BEACH** **33462** **WEST PALM BEACH**

01212004 Chg-P CR2E034 (10/03)
 4. FEI Number Applied For
65-0067825 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required



6. Name and Address of Current Registered Agent
CHAPEL, LEONARDO
 6846 HIGH RIDGE RD
 APT. A.
 LANTANA, FL 33462

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Leonardo Chapel* DATE: **01-29-2004**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
 SIGNATURE: *Leonardo Chapel* DATE: **01-29-2004** DAYTIME PHONE: **(561) 588-7107**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR