	MENT # M91641	IT CORPOR EPORT (AR		FILED Apr 12, 2005 8:00 am Secretary of State
1. Entity Name TOWER ELECTRIC CORP.		Lur L		04-12-2005 90130 003 ***150.00
Principal Plac	e of Business	Mailing Address		-
6846 HIGH F LANTANA F US		6846 HIGH RIDGE LANTANA FL 33462 US		
2. Principal Place of Business 4646 High Linge Lo Suite, Apt. #, etc.		3. Mailing Address 4.846 High KIDG , Suite, Apt. #, etc.	e ko	
Suite, Apt.				1st MOORE CR2E034 (10/04)
City & State		City & State	<u> </u>	4. FEI Number 65-0067825 Applied For Not Applicable
Zip 33467	Country U. P. B	Zip 33462	Country West Phan Burg	5. Certificate of Status Desired Status Desired Fee Required
	6. Name and Address of Curren	t Registered Agent	Name	7. Name and Address of New Registered Agent
CHAPEL, LEONARDO 6846 HIGH RIDGE RD APT. A.				s (P.O. Box Number is Not Acceptable)
	TANA FL 33462			
	- 		City	FL Zip Code
After	ILE NOW!!! FEE IS \$150.00 May 1, 2005 Fee Will Be \$550.0 k Payable to Florida Department OFFICERS ANI	of State	11.	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10. TITLE	D OFFICERS ANI		11. TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY - ST - ZIP	CHAPEL, LEONARDO 6846 HIGH RIDGE ROAD LANTANA, FL 33462		NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	D CHAPEL, DIGNA 6846 HIGH RIDGE ROAD	🗆 Delete	TITLE NAME STREET ADDRESS	Change Additio
CITY-ST-ZIP TITLE	LANTA, FL 33462	Delete	CITY-ST-ZIP TITLE	Change Addillig
NAME	CHAPEL, JOEL 6102 WEST FOLD LAKE WORTH, FL 33462		NAME STREET ADDRESS CITY-ST-ZIP	
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STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP		Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Additio
CITY-ST-ZIP TIFLE NAME STREET ADORESS		Detete	NAME STREET ADDRESS	
CITY-ST-ZIP TTILE STREET ADDRESS CITY-ST-ZIP TTILE STREET ADDRESS CITY-ST-ZIP TTILE NAME , STREET ADDRESS			NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	
CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP 12. hereby findicated of the coordinated	certify that the information supplied w	Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP r the exemption stated in my signature shall have th as required by Chapter 6	Change 🗍 Additio

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