

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90130 003 ***150.00

DOCUMENT # M91641

1. Entity Name
TOWER ELECTRIC CORP.



Principal Place of Business Mailing Address

**6846 HIGH RIDGE
 LANTANA FL 33462
 US** **6846 HIGH RIDGE
 LANTANA FL 33462
 US**

2. Principal Place of Business 3. Mailing Address

6846 High Ridge Rd *6846 High Ridge Rd*

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

LANTANA FL *LANTANA FL*

Zip Zip Country Country

33462 *33462* *West Palm Beach*



1st MOORE CR2E034 (10/04)

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: *04-05-2005*

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, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
 Trust Fund Contribution. 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	
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: *04-05-2005* DAYTIME PHONE #: *561-588-7107*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #