

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051363

**FILED**  
**Apr 01, 2005**  
**Secretary of State**

**Entity Name:** TECNI TOWER, INC.

**Current Principal Place of Business:**

12603 NW 11 PL  
SUNRISE, FL 33323

**New Principal Place of Business:**

1844 NW 93 TERRACE  
PLANTATION, FL 33322

**Current Mailing Address:**

12603 NW 11 PL  
SUNRISE, FL 33323

**New Mailing Address:**

1844 NW 93 TERRACE  
PLANTATION, FL 33322

**FEI Number:** 59-3721709

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SILVA, FERNANDO  
9900 STIRLING ROAD SUITE 240  
COOPER CITY, FL 33024 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CAZAL, JUAN R  
Address: 12603 NW 11 PL  
City-St-Zip: SUNRISE, FL 33323

Title: VD ( ) Delete  
Name: ACOSTA, NIDIA E  
Address: 12603 NW 11 PL  
City-St-Zip: SUNRISE, FL 33323

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN CAZAL

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04/01/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date