


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90357 001 *1,726.25

DOCUMENT # P01000070308 1. Entity Name TOWER ROAD GARDENS, INC.	
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Principal Place of Business 5709 NW 158TH STREET BUILDING 46 MIAMI LAKES, FL 33014	Mailing Address 5709 NW 158TH STREET BUILDING 46 MIAMI LAKES, FL 33014 MI
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DO NOT WRITE IN THIS SPACE

66013833



03302005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1130601	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SWEZY, LEWIS 5709 N.W. 158 STREET MIAMI LAKES, FL 33014
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**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEZY, LEWIS V 5709 NW 158TH STREET BUILDING 46 MIAMI LAKES, FL 33014
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IN THIS SPACE**

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 time empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4/25/05 <small>Date</small>	305 821 0231 <small>Daytime Phone #</small>
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