


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000004585**


1. Entity Name  
**TOWER DELI & DINER, INC.**



Principal Place of Business      Mailing Address

**2315 SOUTH UNIVERSITY DRIVE**      **2315 SOUTH UNIVERSITY DRIVE**  
**DAVIE, FL 33324 US**      **DAVIE, FL 33324 US**

**DO NOT WRITE IN THIS SPACE**



01172007    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>42-1528828</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GOLDSTEIN, ALAN S**  
**1750 EAST OAK KNOLL CIRCLE**  
**DAVIE, FL 33324**

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
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, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GOLDSTEIN, ALAN S 1750 EAST OAK KNOLL CIRCLE DAVIE, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GOLDSTEIN, AMY 1750 EAST OAK KNOLL CIRCLE DAVIE, FL 33324
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01/24/07-80052-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowerments.

SIGNATURE: *Alan Goldstein*      x 1-07-07      954 257-3210  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #