

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000031091

FILED  
Mar 29, 2005  
Secretary of State

Entity Name: TWIN TOWER INSTALLERS INC.

## Current Principal Place of Business:

4865 23RD AVE. S.W.  
NAPLES, FL 34116

## New Principal Place of Business:

6751 NW 188 TERR  
MIAMI, FL 33015

## Current Mailing Address:

4865 23RD AVE. S.W.  
NAPLES, FL 34116

## New Mailing Address:

6751 NW 188 TERR  
MIAMI, FL 33015

FEI Number: 04-3633977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, LUIS E  
4865 23RD AVE. S.W.  
NAPLES, FL 34116 US

## Name and Address of New Registered Agent:

LOPEZ, LUIS E  
6751 NW 188 TERR  
MIAMI, FL 33015 US

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: LUIS LOPEZ

03/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LOPEZ, LUIS E  
Address: 4865 23RD AVE. S.W.  
City-St-Zip: NAPLES, FL 34116

Title: SD ( ) Delete  
Name: ROMERO, BARBARA M  
Address: 4865 23RD AVE. S.W.  
City-St-Zip: NAPLES, FL 34116

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOPEZ, LUIS E  
Address: 6751 NW 188 TERR  
City-St-Zip: MIAMI, FL 33015

Title: SD (X) Change ( ) Addition  
Name: ROMERO, BARBARA M  
Address: 6751 NW 188 TERR  
City-St-Zip: MIAMI, FL 33015

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: LUIS LOPEZ

P

03/29/2005

Electronic Signature of Signing Officer or Director

Date