

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000077896

1. Entity Name

Towering, Inc.



FILED

06 MAY 17 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

19142 S. GARDENIA AVE

Suite, Apt. #, etc.

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

Weston FL

City & State

Zip

33332

Country

Country

4. FEI Number

03-0477328

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Marcelo A. Torres-Lutz

Street Address (P.O. Box Number is Not Acceptable)

19142 S. GARDENIA AVE

City

Weston

FL

Zip Code

33332

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

PD
NAME Cecilia Torres
STREET ADDRESS 19142 S. GARDENIA AVE
CITY-STATE-ZIP Weston, Florida 33332

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
200075547342
05/31/06--01014--017 **300.00

VD
NAME Marcelo A. Torres-Lutz
STREET ADDRESS 19142 S. GARDENIA AVE
CITY-STATE-ZIP Weston, Florida 33332

TITLE
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CITY-STATE-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 registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 10 or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/06

Date

054 349 3976

Daytime Phone

CR2E034B (12/02)



RAUL RICARDO JR.
CERTIFIED PUBLIC ACCOUNTANT

April 26, 2006

Uniform Business Report
Division of Corporation
P.O. Box 1500
Tallahassee, Florida 32302-1500

Ref: Towering Inc.
Document # P02000077896


To Whom It May Concern:

Please be advised that the above-mentioned Corporation did not receive their UBR (Uniform Business Report) form for 2005 & 2006.

We are requesting that you waive the late fees and accept the enclosed UBR along with a check in the amount of \$300 to cover for the initial renewal charges.

If you have any questions, please feel free to contact me at my office number listed below.

Sincerely,



Raul Ricardo, C.P.A.
Lic. # AC0013416