2005 FOR PROFIT CORPORATION

ANNUAL REPORT

08-01-2005 90025 004 ***150 00 **DOCUMENT # P04000081509** TOWER SERVICES AND REPAIR INC 66027050 Principal Place of Business Mailing Address 965 E 2 STREET 965 E 2 STREET 0 £ 3 " HIALEAH, FL 33010 HIALEAH, FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 07132005 CR2E034 (10/03) Chg-P City & State City & State Applied For Not Applicable Ζiρ Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FIGUEROA, MIZAEL P., 965 E 2 STREET Street Address (P.O. Box Number is Not Acceptable) HIALEAH, FL 33010 City Zip Code 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 Whether, types or print (NOTE: Registered Agent signature required when remittating) In accordance with s. 607.193(2)(b), F.S., the FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. corporation did not receive the prior notice. Added to Feas Due by September 7, 2005 10. . / OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, TITLE ☐ Delete TITLE ☐ Change ☐ Addition FIGUEROA, MIZAEL NAME HAME STREET ADDRESS .965 E 2 STREET STREET ADDRESS. CITY-ST-ZIP HIALEAH, FL 33010 CITY-ST-7P TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete IIILE Change Addition MALE HAME STREET ADORESS STREET ADDRESS CITY-ST-ZP CITY-51-Z0P TITLE IIILE Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-70 TITLE ☐ Change TITLE ☐ Deleta ☐ Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP COY-ST-7P IIILE Delete MILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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 tegal effect as if made under eath; 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 statchment with an address, with all other like empowered. NYTHE AND TYPED OBJECTION NAMED TECHNIQUE OFFICER OR DIRECTOR SIGNATURE:

FILED

Sep 08, 2005 8:00 am Secretary of State



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

August 3, 2005

TOWER SERVICES AND REPAIR INC 965 E 2 STREET HIALEAH, FL 33010

Subject: TOWER SERVICES AND REPAIR INC

Reference Number:

P04000081509

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS ANNUAL REPORTS SECTION