

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123849

FILED
Apr 26, 2005
Secretary of State

Entity Name: G TOWER ENTERPRISES INCORPORATED

Current Principal Place of Business:

6101 BLUE LAGOON DR - STE 420
MIAMI, FL 33126

New Principal Place of Business:

8725 NW 18 TERRACE
SUITE 403
DORAL, FL 33172

Current Mailing Address:

6101 BLUE LAGOON DR - STE 420
MIAMI, FL 33126

New Mailing Address:

8725 NW 18 TERRACE
SUITE 403
DORAL, FL 33172

FEI Number: 06-1732271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ELEAZAR A
6101 BLUE LAGOON DR - STE 420
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

GONZALEZ, ELEAZAR A
8725 NW 18 TERRACE
SUITE 403
DORAL, FL 33172 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: GONZALEZ, ELEAZAR A
Address: 6101 BLUE LAGOON DR - STE 420
City-St-Zip: MIAMI, FL 33126

Title: VP () Delete
Name: GONZALEZ, ELEAZAR A
Address: 6101 BLUE LAGOON DR - STE 420
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: GONZALEZ, ELEAZAR A
Address: 8725 NW 18 TERRACE SUITE 403
City-St-Zip: DORAL, FL 33172

Title: VP (X) Change () Addition
Name: GONZALEZ, ELEAZAR A
Address: 8725 NW 18 TERRACE SUITE 403
City-St-Zip: DORAL, FL 33172

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: ELEAZAR A GONZALEZ

PST

04/26/2005

Electronic Signature of Signing Officer or Director

Date