

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90078 047 ***158.75

DOCUMENT # P06000024769

1. Entity Name

C.J. TOWERS, INC.



Principal Place of Business

~~14335 STROLLER WAY~~
~~WELLINGTON FL 33414~~

Mailing Address

~~14335 STROLLER WAY~~
~~WELLINGTON FL 33414~~



2. Principal Place of Business - No P.O. Box #

141 Monte Carlo Drive

Suite, Apt. #, etc.

3. Mailing Address

10 REDGROUND RD.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

PALM BEACH GARDENS

City & State

OLD WESTBURY, N.Y.

4. FEI Number

20-4396211

Applied For

Not Applicable

Zip

33418

Country

USA

Zip

11568

Country

USA

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GAROFALO, CATHERINE

~~14335 STROLLER WAY~~
~~WELLINGTON FL 33414~~

new
address

7. Name and Address of New Registered Agent

Name

GAROFALO, CATHERINE

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

141 MONTE CARLO DRIVE

City

Palm Beach Gardens FL

Zip Code

33418

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

Catherine Garofalo

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-14-07

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

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

TITLE D
NAME GAROFALO, CATHERINE
STREET ADDRESS ~~14335 STROLLER WAY~~
CITY- ST- ZIP ~~WELLINGTON FL 33414~~

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME GAROFALO Torres, Judith
STREET ADDRESS 141 MONTE CARLO DRIVE
CITY- ST- ZIP PALM BEACH GARDENS, FL 33418

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

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CITY- ST- ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 empowered.

SIGNATURE:

Catherine Garofalo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-07

Date

516-626-2782

Daytime Phone #