

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000103142

Entity Name: TOWER ASSOCIATES, INC.

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

7824 N.W. 46TH STREET  
DORAL, FL 33166

## **New Principal Place of Business:**

7824 N.W. 46TH STREET  
DORAL, FL 33166

## **Current Mailing Address:**

PO BOX 331007  
MIAMI, FL 33233

## **New Mailing Address:**

FEI Number: 65-0800504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

TORRES, ARCADIO  
517 FORREST DRIVE  
MIAMI SPRINGS, FL 33166 US

## **Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: TORRES, ARCADIO  
Address: P.O. BOX 331007  
City-St-Zip: MIAMI, FL 33233

Title: S  
Name: TORRES, JULIO C  
Address: 517 FORREST DRIVE  
City-St-Zip: MIAMI SPRINGS, FL 33166

I hereby 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 all other like empowered.

SIGNATURE: ARCADIO TORRES

P

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date