

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000109120

Entity Name: TOWER PUBLICATIONS, INC.

FILED  
Jul 19, 2007  
Secretary of State

## Current Principal Place of Business:

2251 NW 41ST STREET,STE.B  
GAINESVILLE, FL 32606

## New Principal Place of Business:

## Current Mailing Address:

2251 NW 41ST STREET,STE.B  
GAINESVILLE, FL 32606

## New Mailing Address:

FEI Number: 36-4339908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELATORRE, CARLOS  
14524 NW 41ST AVE  
NEWBERRY, FL 32669 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DELATORRE, CARLOS  
Address: 2251 NW 41ST STREET,STE.B  
City-St-Zip: GAINESVILLE, FL 32606

Title: VSTD ( ) Delete  
Name: DELATORRE, BONITA D  
Address: 2251 NW 41ST STREET,STE.B  
City-St-Zip: GAINESVILLE, FL 32606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLIE DELATORRE

PD

07/19/2007

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

\_\_\_\_\_  
Date