

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S61714

1. Entity Name
TOWER ENVIRONMENTAL, INC.

Principal Place of Business: 2268 Kings Point Drive, Largo, Florida 33774 U.S.A.
Mailing Address: 2268 Kings Point Drive, Largo, Florida 33774 U.S.A.

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

Zip: Zip Country: Country

4. FEL Number: 59-3114434 Applied For: Not Applicable:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

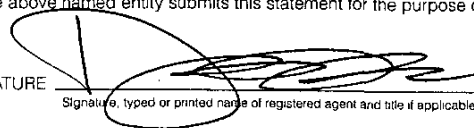
FILED
00 OCT 20 PM 12: 28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT DO NOT WRITE IN THIS SPACE 

6. Name and Address of Current Registered Agent: David S. Jennis, 201 N. Franklin Street, Suite 2600, Tampa, Florida 33602

7. Name and Address of New Registered Agent: Name, Street Address (P.O. Box Number is Not Acceptable), City, FL, 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.

SIGNATURE:  David S. Jennis 10/10/2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees **Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTS/D Young, James 2268 Kings Point Drive Largo, Florida 33774 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300003446893--1 -11/01/00--01053--005 ****750.00 ****750.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 617, 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:  James Young, Director 10/9/00 James Young, Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2FN37 (9/98)

KE