## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 849655**

Name:

Address:

City-St-Zip:

FILED Jan 07, 2009 Secretary of State

Entity Na	me: LOEHMA	NN'S,INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
2500 HALS BRONX, N							
Current Mailing Address:			New Mailing Address:				
2500 HALS BRONX, N							
FEI Number	: 22-2341356	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certifica	ate of Status De	sired()
Name and	l Address of C	urrent Registered Agent:	Name and	Address of N	New Reg	istered Agen	ıt:
515 E. PAI		E RESEARCH,LTD., INC. 01 US					
	e named entity : e of Florida.	submits this statement for the	e purpose of changing i	ts registered c	office or r	egistered age	nt, or both,
SIGNATUI	RE:						
	Electror	ic Signature of Registered A	gent			Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).					
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES	TO OFF	ICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	VPC ( ) MORRETTA, R 2500 HALSEY BRONX, NY 10	STREET	Title: Name: Address: City-St-Zip:	( )	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	CCEO ( ) FRIEDMAN, RO 2500 HALSEY BRONX, NY 10	ST.	Title: Name: Address: City-St-Zip:	PCEO (X POLITZER, JE 2500 HALSEY BRONX, NY 10	RALD S ST.	( ) Addition	
Title: Name: Address: City-St-Zip:	PCCS ( ) GLASS, ROBE 2500 HALSEY BRONX, NY 10	ST.	Title: Name: Address: City-St-Zip:	CFO (X GLASS, ROBE 2500 HALSEY BRONX, NY 10	RT ST.	( ) Addition	
Title:	( )	Delete	Title:	VPC (	) Change	(X) Addition	

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

MORRETTA, RICHARD

2500 HALSEY STREET

BRONX, NY 10461

SIGNATURE: RICHARD MORRETTA **VPC** 01/07/2009