

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F06000006061

FILED
Apr 01, 2008
Secretary of State**Entity Name:** LOWAN CORPORATION**Current Principal Place of Business:**160 WEST CAMINO REAL
#237
BOCA RATON, FL 33432 US**New Principal Place of Business:****Current Mailing Address:**160 WEST CAMINO REAL
#237
BOCA RATON, FL 33432 US**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US**Name and Address of New Registered Agent:**LOUIS VOLLARO
160 W CAMINO REAL #237
BOCA RATON, FL 33486 US

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: LOUIS VOLLARO

04/01/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: VOLLARO, LOUIS
Address: 859 SW 18TH STREET
City-St-Zip: BOCA RATON, FL 33486Title: S () Delete
Name: VOLLARO, LOUIS
Address: 859 SW 18TH STREET
City-St-Zip: BOCA RATON, FL 33486Title: T () Delete
Name: VOLLARO, LOUIS
Address: 859 SW 18TH STREET
City-St-Zip: BOCA RATON, FL 33486Title: D () Delete
Name: VOLLARO, LOUIS
Address: 859 SW 18TH STREET
City-St-Zip: BOCA RATON, FL 33486**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip: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: LOUIS VOLLARO

PRES

04/01/2008

Electronic Signature of Signing Officer or Director

Date