2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40908

LOCATENIOTE N. INIO

FILED Apr 18, 2007 Secretary of State

Entity Name: LOEWENSTEIN, INC.						
Current Pri	incipal Place	of Business:	New Princi	New Principal Place of Business:		
1801 NORTH ANDREWS AVE. POMPANO BEACH, FL 33069						
Current Mailing Address:			New Mailin	New Mailing Address:		
1801 NORTH ANDREWS AVE POMPANO BEACH, FL 33069						
FEI Number:	59-2504882	FEI Number Applied For ()	El Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:						
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	TORTORICI, VIN	DREWS AVENUE	Title: Name: Address: City-St-Zip:	TORTORICI, VII	VN PLACE, SUITE 201	
Title: Name: Address: City-St-Zip:	P ()[MORIARTY, GEN 1801 NORTH AN POMPANO BEAC	DREWS AVE	Title: Name: Address: City-St-Zip:	MORIARTY, GE	VN PLACE, SUITE 201	
Title: Name: Address: City-St-Zip:	D () I POWELL, EARL 2665 S BAYSHO MIAMI, FL 3313	RE DR STE 800	Title: Name: Address: City-St-Zip:	TELL, NICK	Change () Addition MONICA BLVD, SUITE 2000 CA 90025	
Title: Name: Address: City-St-Zip:	S () [GERSHMAN, DA' 2665 S BAYSHO MIAMI, FL 3313	RE DR STE 800	Title: Name: Address: City-St-Zip:	D (X) PACKARD, PAN 4 DEARFIELD L GREENWICH, C	ANE	
Title: Name: Address: City-St-Zip:	D () I KOEHN, ROBER 2665 S BAYSHO MIAMI, FL 3313	RE DR STE 800	Title: Name: Address: City-St-Zip:	TEETSEL, WAY	NUE, 30TH FLOOR	

I hereby certify that the information supplied with this filing does not qualify for the 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: VINCENT TORTORICI CFO 04/18/2007