

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37168

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** PETER LOWE INTERNATIONAL, INC.

**Current Principal Place of Business:**

4710 EISENHOWER BLVD  
STE. B-5  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

4710 EISENHOWER BLVD  
STE. B-5  
TAMPA, FL 33634 US

**New Mailing Address:**

**FEI Number:** 59-3007924

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOWE, PETER S.  
405 SAVOIE DR  
PALM BEACH GARDENS, FL 33410 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: LOWE, PETER S  
Address: 405 SAVOIE DR  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D  
Name: LOWE, TAMARA A  
Address: 405 SAVOIE DR  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D  
Name: LEGUIZAMON, RICARDO  
Address: 2557 JAMES ST.  
City-St-Zip: ABBOTSFORD, BC CANADA, BC V2S 3L6 CA

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GRACE GOSE

DIR

04/21/2011

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

\_\_\_\_\_  
Date