

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045391

Entity Name: LOWE MEDIA, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

8425 SW 138 ST
MIAMI, FL 33158

New Principal Place of Business:

Current Mailing Address:

8425 SW 138 ST
MIAMI, FL 33158

New Mailing Address:

FEI Number: 01-0679392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNARDO, PETER
8425 SW 138 ST
MIAMI, FL 33158

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERNARDO, PETER
Address: 8425 SW 138 ST
City-St-Zip: MIAMI, FL 33158

Title: D (X) Delete
Name: NASAR, ROLAND
Address: 4600 SW 24 ST
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: SQUINDO, CARISSA
Address: 2430 PRAIRIE AVE
City-St-Zip: MIAMI BCH, FL 33140

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER BERNARDO

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date