


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000055209

1. Entity Name
 LOWY AND COOK P.A.



Principal Place of Business Mailing Address

1041 IVES DAIRY ROAD 1041 IVES DAIRY ROAD
 SUITE 238 SUITE 238
 MIAMI, FL 33179 MIAMI, FL 33179



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 14-1889197 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

LOWY, RONALD S
 1041 IVES DAIRY ROAD
 SUITE 238
 MIAMI, FL 33179

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LOWY, RONALD S
STREET ADDRESS	1041 IVES DAIRY ROAD, SUITE 238
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	D
NAME	COOK, ELISSA M
STREET ADDRESS	1041 IVES DAIRY ROAD, SUITE 238
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald S. Lowy, Director Date: 1-7-08 Daytime Phone #: 305-493-9911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR