## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE

## **FILED** Feb 28, 2005 08:00 AM **DOCUMENT # P03000068707 Secretary of State** 1. Entity Name LOWTHER AUTOMOTIVE, INC. Principal Place of Business Mailing Address 620 NE 34TH ST., #A 620 NE 34TH ST., #A POMPANO BCH, FL 33064 POMPANO BCH, FL 33064 02242005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0068863 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent LOWTHER, AIMEE DO NOT WRITE 1411 NE 35TH ST. POMPANO BCH, FL 33064 IN THIS SPACE 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/o egistered agent. Himee Lowther are, typed or printed name of registered agent and title a applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME LOWTHER, JACK STREET ADDRESS 1411 NE 35TH ST. CITY-ST-ZIP POMPANO BCH, FL 33064 THURST STAR LOWTHER, RYAN NAME 1/2/8/115-80040-012 150.00 STREET ADDRESS 3791 NE 13TH TERR. CITY-ST-7IP POMPANO BCH, FL 33064 LOWTHER, AIMEE NAME 1411 NW 35TH ST. STREET ADDRESS DO NOT WRITE CITY-ST-ZIP POMPANO BEACH, FL 33064 TITLE IN THIS SPACE MAME LOWTHER, JENIFER STREET ADDRESS 3791 NE 13TH TERR. CITY-ST-ZIP POMPANO BCH, FL 33064 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 attactive but without address with All other like empowered.

with **al**l other like empowered.