

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000097418

FILED
Mar 25, 2004
Secretary of State

Entity Name: LOW CARB WAREHOUSE CORP.

Current Principal Place of Business:

2200 KINGS HIGHWAY
UNIT 3M MAPLE LEAF PLAZA
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

Current Mailing Address:

2200 KINGS HIGHWAY
UNIT 3M MAPLE LEAF PLAZA
PORT CHARLOTTE, FL 33980

New Mailing Address:

FEI Number: 20-0205109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OAKS, DAVID K ESQ.
407 EAST MARION AVENUE
SUITE 101
PUNTA GORDA, FL 33950 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOMERS, THOMAS L
Address: 2200 KINGS HIGHWAY 132 BEAVER LANE
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: STD () Delete
Name: SOMERS, BRENDA E
Address: 2200 KINGS HIGHWAY 132 BEAVER LANE
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOMERS, THOMAS L
Address: 2200 KINGS HIGHWAY #1076
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: STD (X) Change () Addition
Name: SOMERS, BRENDA E
Address: 2200 KINGS HIGHWAY # 1076
City-St-Zip: PORT CHARLOTTE, FL 33980

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: THOMAS SOMERS

PD

03/25/2004

Electronic Signature of Signing Officer or Director

Date