

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104773

Entity Name: LOWRIDER INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

465 ALEXANDRA CIRCLE
WESTON, FL 33326

New Principal Place of Business:

2201 N W 75 WAY
PEMBROKE PINES, FL 33024

Current Mailing Address:

465 ALEXANDRA CIRCLE
WESTON, FL 33326

New Mailing Address:

2201 N W T5 WAY
PEMBROKE PINES, FL 33024

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALMAU, FERNANDO V
465 ALEXANDRA CIRCLRE
WESTON, FL 33326

Name and Address of New Registered Agent:

DALMAU, LAURO F
2725 MARIAH DRIVE
MELBOURNE, FL 32940

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: LAURO F DALMAU

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALMAU, FERNANDO V
Address: 465 ALEXANDRA CIRCLE
City-St-Zip: WESTON, FL 33326 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DALMAU, LAURO F
Address: 2201 N W 75 WAY
City-St-Zip: PEMBROKE PINES, FL 33024 US

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: LAURO F DALMAU

MR

04/30/2004

Electronic Signature of Signing Officer or Director

Date