2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 25, 2008
Secretary of State

DOCUMENT# P03000147668

Entity Name: SOW CORPORATION

Current Principal Place of Business:

841 PRUDENTIAL DR
1233
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

9951 ATLANTIC BLVD
421
JACKSONVILLE, FL 32225 US

Current Mailing Address:

P.O BOX 10883
JACKSONVILLE, FL 32247 US

New Mailing Address:

FEI Number: 20-0470788 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOUIS DAVID CPA
12627 SAN JOSE BLVD `
SUITE 306
JACKSONVILLE, FL 32223 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

OFFICERS AND DIRECTORS:

Title: COO ( ) Delete
Name: CHRISTIAN, MIQUELLE R
Address: P.O. BOX 10883
City-St-Zip: JACKSONVILLE, FL 32247 US

Title: P ( ) Delete
Name: BENTON J. HAMPTON, P, RESIDENT
Address: P.O. BOX 10883
City-St-Zip: JACKSONVILLE, FL 32247

Title: VP (X) Delete
Name: BRENDA K. SMITH,
Address: P.O. BOX 9692
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHRISTIAN, MIQUELLE R
Address: P.O. BOX 10883
City-St-Zip: JACKSONVILLE, FL 32247 US

Title: COO (X) Change ( ) Addition
Name: SMITH, BRENDA K
Address: P.O. BOX 10883
City-St-Zip: JACKSONVILLE, FL 32247

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MIQUELLE CHRISTIAN P 06/25/2008

Electronic Signature of Signing Officer or Director Date