


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2007 8:00 am
Secretary of State

05-29-2007 90041 050 ***150.00

DOCUMENT # P05000081589					
1. Entity Name 2THOWED LIVE, INC.					
Principal Place of Business 1203 17TH AVE N # 1 LAKE WORTH, FL 33460			Mailing Address 1203 17TH AVE N # 1 LAKE WORTH, FL 33460		
2. Principal Place of Business - No P.O. Box # 2785 Reo Lane			3. Mailing Address ←		
Suite, Apt. #, etc. Apt. # 1			Suite, Apt. #, etc. ← Same		
City & State Lake Worth, FL			City & State ←		
Zip 33461		Country USA		Zip ← Country ←	
6. Name and Address of Current Registered Agent MACHIOLA, STEVEN H 6801 LAKE WORTH ROAD SUITE 124 LAKE WORTH, FL 33467				7. Name and Address of Current Registered Agent Name Steven H. Machiola Street Address (P.O. Box Number is Not Acceptable) 1035 State Rd 7 Ste 215 City Wellington FL Zip Code 33414	
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 <u>Steven H Machiola</u> DATE <u>5/5/07</u> <small>(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WILLIAMS, KENDRICK 1203 17TH AVE N #1 LAKE WORTH, FL 33460	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Williams, Kendrick 2785 Reo Lane Apt 1 Lake Worth, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DOUGLAS, EDDIE 1203 17TH AVE N #1 LAKE WORTH, FL 33460	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Douglas, Eddie 2785 Reo Lane Lake Worth, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: <u>Steven Machiola</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date				Daytime Phone #	