2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2006
Secretary of State

DOCUMENT# P05000153991

Entity Name: LOWER INTEREST MORTGAGE INC.

Current Principal Place of Business:

10162 MONTAGE ST
TAMPA, FL 33626

New Principal Place of Business:

134 ARLINGTON AVE W
OLDSMAR, FL 34677

Current Mailing Address:

10162 MONTAGE ST
TAMPA, FL 33626

New Mailing Address:

134 ARLINGTON AVE W
OLDSMAE, FL 34677

FEI Number: 20-3781156 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COWARD, BRYAN
10162 MONTAGE ST
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

COWARD, BRYAN
134 ARLINGTON AVE W
OLDSMAR, FL 34677 US

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: 09/02/2006
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: COWARD, BRYAN
Address: 10162 MONTAGE ST
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition
Name: COWARD, BRYAN
Address: 134 ARLINGTON AVE W
City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information supplied with this filing does not qualify for the 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: BRYAN COWARD PTSD 09/02/2006
Electronic Signature of Signing Officer or Director — Date