

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000154740

Entity Name: LOTM, INC.

FILED
Oct 05, 2007
Secretary of State

Current Principal Place of Business:

1311 7TH ST
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1311 7TH ST
KEY WEST, FL 33040

New Mailing Address:

PO BOX 4113
KEY WEST, FL 33041

FEI Number: 14-1984531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CATALFOMO, ANTHONY
506 LOUISA ST
KEY WEST, FL 33040 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: ANTHONY CATALFOMO

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: PD () Delete
Name: REAGAN, MICHAEL W
Address: 1311 7TH ST
City-St-Zip: KEY WEST, FL 33040

Title: VPST () Delete
Name: HOUGHTON, JOHN C
Address: 5100 SUNCREST RD - APT 102
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHAEL W REAGAN

PD

10/05/2007

Electronic Signature of Signing Officer or Director

Date