

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000061764

Entity Name: LOWEFIN, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2047 BLUE SPRINGS RD  
WEST PALM BEACH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

2047 BLUE SPRINGS RD  
WEST PALM BEACH, FL 33411 US

**New Mailing Address:**

FEI Number: 27-3143343

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EHMKE, DANIEL  
621 S FEDERAL HIGHWAY  
STE 9  
FORT LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

ANDREWS, TOM  
9 SW 13TH STREET  
FORT LAUDERDALE, FL 33315 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: TOM ANDREWS

01/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P,S  
Name: LOWE, KEITH M  
Address: 2047 BLUE SPRINGS RD  
City-St-Zip: WEST PALM BEACH, FL 33411 US

I hereby 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 all other like empowered.

SIGNATURE: KEITH M LOWE

P

01/06/2012

Electronic Signature of Signing Officer or Director

Date