

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000093167

Entity Name: EBOWE SERVICES, INC

**FILED**  
**Mar 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

347 N NEW RIVER DRIVE EAST  
#2102  
FORT LAUDERDALE, FL 33301 US

**New Principal Place of Business:**

**Current Mailing Address:**

347 N NEW RIVER DRIVE EAST  
#2102  
FORT LAUDERDALE, FL 33301 US

**New Mailing Address:**

FEI Number: 65-0543126      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BOWE, JOHN  
347 N NEW RIVER DRIVE EAST  
#2102  
FORT LAUDERDALE, FL 33301 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: PD  
Name: BOWE, JOHN  
Address: 347 N NEW RIVER DRIVE EAST  
City-St-Zip: FORT LAUDERDALE, FL 33301

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: JOHN BOWE

PD

03/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date