

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000000603

**Entity Name:** LAWO INC.**Current Principal Place of Business:**99 HUDSON STREET, 5TH FLOOR  
NEW YORK, NY 10013**Current Mailing Address:**99 HUDSON STREET, 5TH FLOOR  
NEW YORK, NY 10013**FEI Number:** 80-0955732**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	CP
Name	LAWO, PHILIPP
Address	AM OBERWALD 8
City-State-Zip:	RASTATT 76437

Title	DT
Name	NOWAK, CLAUDIA
Address	AM OBERWALD 8
City-State-Zip:	RASTATT 76437

Title	DIRECTOR
Name	DUNN, JAMIE
Address	POSTSTR. 5
City-State-Zip:	WATT 8105

Title	VP
Name	WHITMAN, MARK
Address	99 HUDSON STREET, 5TH FLOOR
City-State-Zip:	NEW YORK NY 10013

Title	S
Name	FERRING, VERONIQUE
Address	AM OBERWALD 8
City-State-Zip:	RASTATT 76437

Title	AT
Name	SCHADE, KLAUS
Address	AM OBERWALD 8
City-State-Zip:	RASTATT 76437

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KLAUS SCHADE**ASSISTANT TREASURER** 02/14/2019

Electronic Signature of Signing Officer/Director Detail

Date