

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000007282

Entity Name: WOMEN ON THE RISE INTERNATIONAL, INC.**Current Principal Place of Business:**1964 EXCALIBUR DRIVE
ORLANDO, FL 32822**Current Mailing Address:**5833 S. GOLDENROD ROAD, STE B#151
ORLANDO, FL 32822 US**FEI Number: 81-3388107****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BLAKE, ARLENE
1964 EXCALIBUR DRIVE
ORLANDO, FL 32822 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	D
Name	GROSS, SAMANTHA
Address	5833 S. GOLDENROD RD. SUITE B #151
City-State-Zip:	ORLANDO FL 32822

Title	DT
Name	MUUKA, FIDELIS
Address	5833 S. GOLDENROD RD. SUITE B #151
City-State-Zip:	ORLANDO FL 32822

Title	D
Name	JALHAN, RETU
Address	5833 S. GOLDENROD SUITE B #151
City-State-Zip:	ORLANDO FL 32822

Title	DP
Name	BLAKE, ARLENE
Address	1964 EXCALIBUR DRIVE
City-State-Zip:	ORLANDO FL 32822
Title	DV
Name	DUNLAP, TAMMIE
Address	5833 S. GOLDENROD RD. SUITE B #151
City-State-Zip:	ORLANDO FL 32822

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: ARLENE BLAKE**DP****04/19/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date