

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008
Secretary of State

DOCUMENT# F07000004738

Entity Name: THE WOMEN'S ALLIANCE INC.

Current Principal Place of Business:

250 NW 9TH ST
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

3745 NE 171 ST STREET STE 62
MIAMI, FL 33160

New Mailing Address:

FEI Number: 52-2168980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GOLDSMITH, GLEN R
9130 S DADELAND BLVD STE 1509
MIAMI, FL 33156 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: D () Delete
Name: HINZ, VICKI
Address: 2525 PONCE DE LEON BLVD 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: WILD, NILDE
Address: 3745 NE 171 ST STE 62
City-St-Zip: MIAMI, FL 33160

Title: P () Delete
Name: COLE, SHERI
Address: 1211 CHESTNUT ST STE 205
City-St-Zip: PHILADELPHIA, PA 19107

Title: VT () Delete
Name: VAN VEEN, SUSAN
Address: 2609 YORK COURT
City-St-Zip: WOODRIDGE, IL 60517

Title: S () Delete
Name: KEARNS, TERRI
Address: 58 DEMOUY AVE
City-St-Zip: MOBILE, AL 36606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: WILD, NICOLE
Address: 3745 NE 171 ST STE 62
City-St-Zip: MIAMI, FL 33160

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

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

SIGNATURE: NICOLE WILD

D

05/22/2008

Electronic Signature of Signing Officer or Director

_____ Date