

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000001852

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: PHENOMENAL WOMAN, INC.

## Current Principal Place of Business:

6777 NW 7TH AVE  
1  
MIAMI, FL 33150

## New Principal Place of Business:

## Current Mailing Address:

6777 NW 7TH AVE  
1  
MIAMI, FL 33150

## New Mailing Address:

FEI Number: 65-1076313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PENHA, FRANCOISE  
88 NW 85TH STREET  
MIAMI, FL 33147 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: P ( ) Delete  
Name: ROBINSON, ANDREA  
Address: 10161 SW 18TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: P ( ) Delete  
Name: HOBBS, SHARON  
Address: 6777 NW 7TH AVE  
City-St-Zip: MIAMI, FL 33150

Title: VD ( ) Delete  
Name: SPENCER, MICHELLE  
Address: 6777 NW 7TH AVE  
City-St-Zip: MIAMI, FL 33150

Title: T ( ) Delete  
Name: REDMON, CURTIS  
Address: 6777 NW 7TH AVE  
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete  
Name: EWINGS, REBECCA  
Address: 6777 NW 7TH AVE  
City-St-Zip: MIAMI, FL 33150

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: S ( ) Change (X) Addition  
Name: PENHA, FRANCES  
Address: 6777 N.W. 7TH AVENUE, SUITE 1  
City-St-Zip: MIAMI, FL 33150

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBINSON, ANDREA

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date