

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006089

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: PROGRESSIVE INTERNATIONAL WOMEN'S CORP.

Current Principal Place of Business:

7221 MIAMI LAKES DR
A 28 APT MIAMI LAKES
MIAMI, FL 33014

New Principal Place of Business:

Current Mailing Address:

7221 MIAMI LAKES DR
A 28 APT MIAMI LAKES
MIAMI, FL 33014

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUKHARI, MAHWISH R
7221 MIAMI LAKES DR
A 28 APT MIAMI LAKES
MIAMI, FL 33014 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: BUKHARI, MAHWISH R
Address: 7221 MIAMI LAKES DR A28 APT
City-St-Zip: MIAMI, FL 33014

Title: D () Delete
Name: IMRAN, MALIHA
Address: 2020 S 87AVEN
City-St-Zip: OMAHA, NE 68124

Title: V () Delete
Name: RASHID, SARMAD
Address: 1410SO CALHOUN
City-St-Zip: NEW BERLIN, WI 53151

Title: D () Delete
Name: BOKHARI, SHUMAIL R
Address: 7221 MIAMI LAKES DR A 28APT
City-St-Zip: MIAMI, FL 33014 US

Title: D () Delete
Name: BOKHARI, SHAHNAZ
Address: 7221 MIAMI LAKES DR A 28APT
City-St-Zip: MIAMI, FL 33014

Title: D () Delete
Name: RASHID, SAMIA B
Address: 7221 MIAMI LAKES DR A.28APT
City-St-Zip: MIAMI, FL 33014

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
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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 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: SHAHNAZ BUKHARI

D

04/29/2002

Electronic Signature of Signing Officer or Director

Date