

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000003482

FILED  
Sep 11, 2003  
Secretary of State

Entity Name: DIVAS ON THE RISE, INC.

## Current Principal Place of Business:

7924 GULF ROAD SOUTH  
JACKSONVILLE, FL 32244

## New Principal Place of Business:

P O BOX 40734  
JACKSONVILLE, FL 32203

## Current Mailing Address:

P.O. BOX 40734  
JACKSONVILLE, FL 32203

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

WILLIAMS, NORMA  
7924 GULF ROAD SOUTH  
JACKSONVILLE, FL 32244

## Name and Address of New Registered Agent:

WILLIAMS, NORMA  
P O BOX 40734  
JACKSONVILLE, FL 32203

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: NORMA WILLIAMS

09/11/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILLIAMS, NORMA  
Address: 7924 GULF ROAD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VD ( ) Delete  
Name: WEST, BENNYE FAYE  
Address: 7129 LINDA DR  
City-St-Zip: JACKSONVILLE, FL 32208

Title: SD ( ) Delete  
Name: HUBBARD, JUDY  
Address: 10293 TAURINE RIDGE DR  
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD ( ) Delete  
Name: JONES, GWENDOLYN  
Address: 10535 LEM TURNER RD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: FREEMAN, MELISSA  
Address: P.O. BOX 43458  
City-St-Zip: JACKSONVILLE, FL 32203

Title: D ( ) Delete  
Name: REED, JULIE  
Address: P.O. BOX 28302  
City-St-Zip: JACKSONVILLE, FL 32203

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILLIAMS, NORMA  
Address: P O BOX 40734  
City-St-Zip: JACKSONVILLE, FL 32203

Title: VD (X) Change ( ) Addition  
Name: JACKSON, BRIDGET  
Address: 8737 7TH AVENUE  
City-St-Zip: JACKSONVILLE, FL 32208

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

Title: TD (X) Change ( ) Addition  
Name: SABLON, MADRA  
Address: P O BOX 43458  
City-St-Zip: JACKSONVILLE, FL 32203

Title: D (X) Change ( ) Addition  
Name: RICHARD, RHONDA  
Address: P.O. BOX 2612  
City-St-Zip: KENNER, FL 70062

Title: D (X) Change ( ) Addition  
Name: MELVIN, MARY  
Address: 392 CAIRO ST. N.W.  
City-St-Zip: ATLANTA, GA 30314

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: NORMA WILLIAMS

PD

09/11/2003

Electronic Signature of Signing Officer or Director

Date