2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000132

HARARI, HELGA

2121 SE. BOWIE ST

PORT ST LUCIE, FL 34952 US

Name:

Address:

City-St-Zip:

FILED Feb 21, 2005 Secretary of State

Entity Nan	ne: FEMINE	NZA NETV	VORK INC.			
Current Principal Place of Business:				New Principal Pla	New Principal Place of Business:	
1802 ANTION	QUA RD EACH, FL 3	3406 US	3			
Current Mailing Address:				New Mailing Address:		
PO BOX 60 STUART, F		US				
FEI Number:	14-1864409	FEI Num	ber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
	OWIE ST. LUCIE, FL 3 named entity			rpose of changing its registe	ered office or registered agent, or both,	
SIGNATUR						
		Ū	ure of Registered Ager		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MARCUS, LIS 10930 KINGB BOCA RATON	AY DR.	Js	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (HAMILL, ELIZ 1802 ANTIGU WEST PALM	A RD.	33406 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	ST () Delete		Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HELGA HARARI 02/21/2005 ST