

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48295

FILED
Apr 29, 2004
Secretary of State

Entity Name: FLORIDA TRADESWOMEN'S NETWORK, INC.

Current Principal Place of Business:

5166 S.W. 6TH STREET
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

5166 S.W. 6TH STREET
MIAMI, FL 33134

New Mailing Address:

FEI Number: 65-0344033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURAN, DIANE
5166 SW 6TH STREET
MIAMI, FL 33134 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/P () Delete
Name: DURAN, DIANE
Address: 5166 S.W. 6TH STREET
City-St-Zip: MIAMI, FL 331341370

Title: DV () Delete
Name: MUSIAL, CHRISTINE N
Address: 5414 S.W. 44TH TERR.
City-St-Zip: FT. LAUDERDALE, FL 33314

Title: D/S () Delete
Name: WAGNER, MARY
Address: 27020 S.W. 142 AVE.
City-St-Zip: NARANJA, FL 33032

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:

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: DIANE DURAN

RA

04/29/2004

Electronic Signature of Signing Officer or Director

Date