2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



FILED Feb 14, 2003 8:00 am Secretary of State

1. Entity Name	WOMEN BUSINESS ENTER				2-14-2003 90212 0		00
Principal Place of Business 625 E. COLONIAL DRIVE ORLANDO FL 32803 US 2. Principal Place of Business Suite, Apt. #, etc.		Mailing Address 625 E. COLONIAL DRIVE ORLANDO FL 32803 US 3. Mailing Address					
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		Suite, Apt. #, etc.			HECK HERE IF MAKING	G CHANGES	
City & State		City & State		4. FEI Number 59-3286950		<u> </u>	olied For Applicable
Zip Country		Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current	Registered Agent	and the second second	7. Name and Address	ess of New Registered	Agent	
BROWN-H	IARRIS, ANN P	SAME	Name A	A BROW S (BO) Box Number is No	n PAGNE		
	LLIANCE INC.	NAME	M	WBE An	ciance, 7	-ne -	
	DLONIAL DRIVE	citange	درا	< E. C.	Jonial D	RIVE	
) FL 32803	CHIT	City		FL	Zip Code	2
	named entity submits this statement			LANDS		<u>- 33003</u>	
SIGNATURE	ions of registered agent. Signature, typed or printed name of registered ager	Land tille if applicable (NOTE:	And B Registered Agent signature requ	Rown PAYN	& 3/6/ DATE	£2\	
	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make Chec Florida Depa	ck Payable triment of S	to State
F	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Florida Depa	rtment of S	State
10.	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Make Chec Florida Depa	rtment of S	State
TITLE	FILE NOW: FEE IS \$61.25 OFFICERS AND D	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Florida Depa	rtment of S	State 10
10. TITLE NAME	FILE NOW: FEE IS \$61.25 OFFICERS AND DC ZAK, RODERICK R REV	9. Election Cam Trust Fund Co	paign Financing ontribution. 11. TITLE NAME	\$5.00 May Be Added to Fees	Florida Depa	rtment of S	State 10
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E. Colonial Deve Anno FL 32883 BELAMO 12. I hereby certify that the information supplied with this filing does not qualify 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 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

BESIDENT +COD 2/6/03 407425860