

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000382

FILED
Apr 24, 2007
Secretary of State

Entity Name: TOMORROW'S WOMAN, INC.

Current Principal Place of Business:

1529 ITCHEPACKESASSA DRIVE
LAKE LAND, FL 33810

New Principal Place of Business:

4111 MOSSY OAK DR
LAKE LAND, FL 33810

Current Mailing Address:

POST OFFICE BOX 91592
LAKE LAND, FL 33804

New Mailing Address:

FEI Number: 59-3488034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIMA, LILLIAN
1529 ITCHEPACKESASSA DRIVE
LAKE LAND, FL 33810 US

Name and Address of New Registered Agent:

LIMA, LILLIAN
4111 MOSSY OAK DR
LAKE LAND, FL 33810 US

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:

04/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCT () Delete
Name: LIMA, LILLIAN
Address: 1529 ITCHEPACKESASSA DR
City-St-Zip: LAKE LAND, FL 33810

Title: DVS () Delete
Name: LING, SEMONA
Address: 5653 VIBURNUM CT
City-St-Zip: POLK CITY, FL 33868

Title: DP () Delete
Name: SABARI, TIFFANY
Address: 6138 TURNBURY PARK DR, # 6306
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCT (X) Change () Addition
Name: LIMA, LILLIAN
Address: 4111 MOSSY OAK DR
City-St-Zip: LAKE LAND, FL 33810

Title: DVS (X) Change () Addition
Name: LING, SEMONA
Address: 5112 LONGLAKE CIRCLE #201
City-St-Zip: LAKE LAND, FL 33805

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 Chapter 119, 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: LILLIAN LIMA

DCT

04/24/2007

Electronic Signature of Signing Officer or Director

Date