

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033226

FILED
Mar 31, 2004
Secretary of State

Entity Name: WOMEN'S HELP NETWORK, INC.

Current Principal Place of Business:

224 DATURA STREET
SUITE 409
WEST PALM BEACH, FL 33401

Current Mailing Address:

4110 NW 58TH STREET
COCONUT CREEK, FL 33073

New Principal Place of Business:

224 DATURA STREET
SUITE 404
WEST PALM BEACH, FL 33401

New Mailing Address:

224 DATURA STREET
SUITE 404
WEST PALM BEACH, FL 33401

FEI Number: 42-1532381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERNON, GINA
224 DATURA STREET
SUITE 409
WEST PALM BEACH, FL 33401

Name and Address of New Registered Agent:

VERNON, H
224 DATURA STREET
SUITE 404
WEST PALM BEACH, FL 33401

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: H VERNON

03/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VERNON, GINA
Address: 224 DATURA STREET, SUITE 409
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VERNON, HELENE
Address: 224 DATURA STREET, SUITE 404
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP () Change (X) Addition
Name: VERNON, G
Address: 224 DATURA STREET, SUITE 404
City-St-Zip: WEST PALM BEACH, FL 33401

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELENE VERNON

P

03/31/2004

Electronic Signature of Signing Officer or Director

Date