## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000087329

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

() Delete

Entity Name: MAISED MAMAN ENTERDRI

FILED Jan 30, 2003 Secretary of State

Entity Name: Wi	SER WOMAN ENTERPRISES, IN	C.			
Current Principal Place of Business:		New Princ	New Principal Place of Business:		
878 109TH AVENU SUITE 3 NAPLES, FL 3410					
Current Mailing A		New Maili	ng Address:		
878 109TH AVENU SUITE 3 NAPLES, FL 3410					
FEI Number: 06-1644	FEI Number Applied For ( )	FEI Number Not App	icable ( ) Certificate of Status Des	ired()	
Name and Addres	ss of Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
CASH, CONNACH 878 109TH AVENU SUITE 3 NAPLES, FL 3410 The above named in the State of Flori	JE NORTH 8 entity submits this statement for th	e purpose of changing i	ts registered office or registered ager	it, or both,	
SIGNATURE:					
E	lectronic Signature of Registered A	Agent	Date		
Election Campaign Fi	nancing Trust Fund Contribution(). DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND D	DIRECTORS:	
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	MS. () Change (X) Addition CONNACHT, CASH TREAS. 1896 SEVILLE BLVD., #1712 NAPLES, FL 34109 US		
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	MS. () Change (X) Addition CONNACHT, CASH PRES. 1896 SEVILLE BLVD., #1712 NAPLES, FL 34109 US		
Title: Name:	( ) Delete	Title: Name:	MS. ( ) Change (X) 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

1896 SEVILLE BLVD., #1712

( ) Change (X) Addition

NAPLES, FL 34109 US

CONNACHT, CASH SEC.

NAPLES, FL 34109 US

1896 SEVILLE BLVD., #1712

SIGNATURE: CONNACHT CASH PRES 01/30/2003