

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000102394

**FILED**  
**Sep 20, 2010**  
**Secretary of State**

**Entity Name:** NOURISHING WOMEN CORP.

**Current Principal Place of Business:**

1040 NW 185 AVENUE  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

1040 NW 185 AVENUE  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 04-3714039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MURCIANO-LUNA, LEONOR  
1040 NW 185 AVENUE  
PEMBROKE PINES, FL 33029 US

**Name and Address of New Registered Agent:**

MURCIANO-CHEN, LEONOR  
1040 NW 185 AVENUE  
PEMBROKE PINES, FL 33029 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:** LEONOR MURCIANO-CHEN

09/20/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** MURCIANO-CHEN, LEONOR  
**Address:** 1040 NW 185 AVENUE  
**City-St-Zip:** PEMBROKE PINES, FL 33029

I hereby 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 all other like empowered.

**SIGNATURE:** LEONOR MURCIANO-CHEN

DR.

09/20/2010

Electronic Signature of Signing Officer or Director

Date