

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000092343

FILED
Jan 18, 2008
Secretary of State

Entity Name: WOMENS BUSINESS MASTERMIND GROUP, INC.

Current Principal Place of Business:

4151 SW 106 TERRACE
DAVIE, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

4151 SW 106 TERRACE
DAVIE, FL 33328 US

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISCHLER, MICHAEL A ESQ.
1000 SOUTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

ARGYRIOS, THEODOSIOU
4151 SW 106 TR
DAVIE, FL 33328 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: ARGYRIOS THEODOSIOU

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: THEODOSIOU, BARBARA
Address: 4151 SW 106 TERRACE
City-St-Zip: DAVIE, FL 33328

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D.V () Change (X) Addition
Name: THEODOSIOU, ARGYRIOS
Address: 4151 SW 106 TERRACE
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARGYRIOS THEODOSIOU

DV

01/18/2008

Electronic Signature of Signing Officer or Director

Date