

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000085019

Entity Name: WOMB SERVICE, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

972 S.W. 113TH TERRACE
PEMBROKE PINE, FL 33025

New Principal Place of Business:

16355 TUDOR LAKE CT
ORLANDO, FL 32828 US

Current Mailing Address:

972 S.W. 113TH TERRACE
PEMBROKE PINE, FL 33025

New Mailing Address:

16355 TUDOR LAKE CT
ORLANDO, FL 32828 US

FEI Number: 90-0415971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, ONIDIS P
972 S.W. 113TH TERRACE
PEMBROKE PINE, FL 33025 US

Name and Address of New Registered Agent:

LOPEZ, ONIDIS P
16355 TUDOR LAKE CT
ORLANDO, FL 32828 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: ONIDIS PATRICIA LOPEZ

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: LOPEZ, ONIDIS P
Address: 972 S.W. 113TH TERRACE
City-St-Zip: PEMBROKE PINE, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: LOPEZ, ONIDIS P
Address: 16355 TUDOR LAKE CT
City-St-Zip: ORLANDO, FL 32828 US

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: ONIDIS PATRICIA LOPEZ

PT

04/30/2009

Electronic Signature of Signing Officer or Director

Date