## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000087100

Entity Name: WOMEN'S PRODUCE, INC.

FILED Mar 10, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

725 EAST 3RD AVE 321 EAST 6 STREET HIALEAH, FL 33010 225

HIALEAH, FL 33010

**Current Mailing Address: New Mailing Address:** 

725 EAST 3RD AVE 321 EAST 6 STREET HIALEAH, FL 33010 HIALEAH, FL 33010

FEI Number: 80-0316519 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SILVA, FABIOLA ARIEL, PALET

750 SW 12TH AVE 321 EAST 6 STREET POMPANO BEACH, FL 33069 US HIALEAH, FL 33010 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: ARIEL PALET 03/10/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: PRFS (X) Change ( ) Addition ACVOSTA, MARLENI ARIEL, PALET Name: 725 EAST 3RD AVE 321 EAST 6 STREET Address: City-St-Zip:

HIALEAH, FL 33010 City-St-Zip: HIALEAH, FL 33010

Title: Title: **VPRE** (X) Change ( ) Addition () Delete Name:

MARLENI, ACOSTA HUFFAKER, CLARA Name: 725 EAST 3RD AVE 321 EAST 6 STREET Address: Address: HIALEAH, FL 33010 HIALEAH, FL 33010 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: SEC ( ) Change (X) Addition

Name: MARLENI, ACOSTA Name: 321 EAST 6STREET Address: Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33010

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: MARLENI ACOSTA **VPRE** 03/10/2009