

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000033609

Entity Name: FLORIDA WOMEN'S EXPO, INC.

FILED  
Jan 11, 2008  
Secretary of State

## Current Principal Place of Business:

16284 SHADOW PINE RD  
NORTH FORT MYERS, FL 33917

## New Principal Place of Business:

## Current Mailing Address:

16284 SHADOW PINE RD  
NORTH FORT MYERS, FL 33917

## New Mailing Address:

FEI Number: 65-0946641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVIELLO, MARLENE  
16284 SHADOW PINE RD  
NORTH FORT MYERS, FL 33917 US

## Name and Address of New Registered Agent:

RIVIELLO, MARLENE E  
16284 SHADOW PINE RD  
NORTH FORT MYERS, FL 33917 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: MARLENE E. RIVIELLO

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RIVIELLO, MARLENE  
Address: 16284 SHADOW PINE RD  
City-St-Zip: NORTH FORT MYERS, FL 33917

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARLENE E. RIVIELLO

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

Date