

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000005192

**Entity Name:** REVIVE WOMAN INC.

**Current Principal Place of Business:**

1803 N HOWARD AVE  
TAMPA, FL 33607

**Current Mailing Address:**

1803 N HOWARD AVE  
TAMPA, FL 33607 US

**FEI Number:** 86-3722992

**Certificate of Status Desired:** No

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

DIAZ, CATHRINE  
1803 N HOWARD AVE  
SUITE 100  
TAMPA, FL 33607 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name PYLE, ERICA L  
Address 633 MARMORA AVENUE  
City-State-Zip: TAMPA FL 33606

Title VP  
Name PYLE, DOUGLAS E  
Address 633 MARMORA AVENUE  
City-State-Zip: TAMPA FL 33606

Title SEC  
Name DIAZ, CATHRINE  
Address 6918 N CENTRAL AVE  
City-State-Zip: TAMPA FL 33604

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CATHRINE DIAZ

**SECRETARY**

**03/21/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date