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Jul 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N93000001039 (7)**

1. Corporation Name

WOMEN IN INTERNATIONAL TRADE, INC.



Principal Place of Business

Mailing Address

BOX 111709
MIAMI FL 33111
US

BOX 111709
MIAMI FL 33111-1709
US

3. Date Incorporated or Qualified
02/22/1993

3a. Date of Last Report
02/21/1996

2. Principal Place of Business

2a. Mailing Address

21 **444 Brickell Ave.**

26 **444 Brickell Ave.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **# 51-329**

27 **# 51-329**

City & State

City & State

23 **Miami, FL**

28 **Miami, FL**

Zip

Country

Zip

Country

24 **33131**

25 **USA**

29 **33131**

30 **USA**

4. FEI Number
65-0392515

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SANDLER, TRAVIS & ROSENBERG, P.A.
5200 BLUE LAGOON DRIVE
SUITE 600
MIAMI FL 33126-2022**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☒ DELETE

NAME **RAIM, IANNS**
STREET ADDRESS **BOX 11709**
CITY-ST-ZIP **MIAMI FL**

TITLE **DVP** ☒ DELETE

NAME **BAER, LORI**
STREET ADDRESS **BOX 11709**
CITY-ST-ZIP **MIAMI FL**

TITLE **DS** ☐ DELETE

NAME **CALDERON, INEZ**
STREET ADDRESS **BOX 11709**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DP ☒ Change ☐ Addition

Roymi Membela - Cordoba
444 Brickell Ave., # 51-329
Miami, FL 33131

DVP ☒ Change ☐ Addition

Jean Giles Cordoba
444 Brickell Ave., # 51-329
Miami, FL 33131

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

Lisa Landy
444 Brickell Ave., # 51-329
Miami, FL 33131

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE: LISA LANDY 7/10/97

CR2E037 (9/96)