

2001 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jul 13, 2001 8:00 am
Secretary of State

05-14-2001 90038 050 ****61.25

DOCUMENT # N99000006596

1. Entity Name

MUJERES LATINAS IMPULSANDO MUJERES LATINAS, INC.

VA

Principal Place of Business

Mailing Address

18459 PINES BLVD.,STE.342
 PEMBROKE PINES FL 33029

18459 PINES BLVD.,STE.342
 PEMBROKE PINES FL 33029

2. Principal Place of Business

P.O. Box 267336

3. Mailing Address

P.O. Box 267336

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Weston FL

City & State

Weston FL

4. FEI Number

65-0998319

Applied For

Not Applicable

Zip

33326

Country

USA

Zip

33326

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~SALCEDO MAPPY~~
~~18459 PINES BLVD.,STE.342~~
~~PEMBROKE PINES FL 33029~~

7. Name and Address of New Registered Agent

Name: Ileana Arias
 Street Address (P.O. Box Number is Not Acceptable): 1725 MAIN ST. Ste # 205
 City: Weston FL Zip Code: 33326

8. 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

[Handwritten Signature]

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

(NOTE: Registered Agent signature required when reinstating)

07/10/01
 DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Actions
PD	SALCEDO, MAPPY	18459 PINES BLVD.,STE.342	PEMBROKE PINES FL 33029	<input checked="" type="checkbox"/> Delete
VD	DELOS ANGELES VILLAR, MARIA	18459 PINES BLVD.,STE.342	PEMBROKE PINES FL 33029	<input checked="" type="checkbox"/> Delete
SD	ANTONIETA DIAZ, MARIA	18459 PINES BLVD.,STE.342	PEMBROKE PINES FL 33029	<input checked="" type="checkbox"/> Delete
TD	EDDE, ZORAIDA	18459 PINES BLVD.,STE.342	PEMBROKE PINES FL 33029	<input checked="" type="checkbox"/> Delete
D	COHEN FURMAN, TAMY COORD.	18459 PINES BLVD.,STE.342	PEMBROKE PINES FL 33029	<input checked="" type="checkbox"/> Delete
D	DEL VALLE, SANDRA COORD.	18459 PINES BLVD.,STE.342	PEMBROKE PINES FL 33029	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Actions
PD	Sierra, Azarel	P.O. Box 267336	Weston FL 33326	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
VD	Cinthya Figueroa	P.O. Box 267336	Weston FL 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
SD	Alexandra Gonzalez	P.O. Box 267336	Weston FL 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TD	INBRID TRUFANT	P.O. Box 267336	Weston FL 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D	MARGARET Delmont	P.O. Box 267336	Weston FL 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D	Ana Arriola	P.O. Box 267336	Weston FL 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature]
 Ileana Arias, Director

07/30/01

(954) 3852284

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (10/00)

Attachment
D# N99000006596
76348



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

May 22, 2001

MUJERES LATINAS IMPULSANDO MUJERES LATINAS, INC.
P.O. BOX 267336
WESTON, FL 33326

Subject: **MUJERES LATINAS IMPULSANDO MUJERES LATINAS, INC.**

Reference Number: **N99000006596**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please contact the Division of Corporations at (850) 488-9000.

/ew
ANNUAL REPORTS SECTION

Attachment

List of Directors
Continuation...

Director / Legal advisor
Ileana Arias
P.O. Box 267336
Weston FL 33326

76348

199000006596

Director
Maria Teresa Boyd
P.O. Box 267336
Weston FL 33326

Director
Sandra del Valle
P.O. Box 267336
Weston FL 33326