

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006596

FILED
Jan 12, 2006
Secretary of State

Entity Name: MUJERES LATINAS IMPULSANDO MUJERES LATINAS, INC.

Current Principal Place of Business:

P.O. BOX 267336
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 267336
WESTON, FL 33326

New Mailing Address:

FEI Number: 65-0998319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARIAS, ILEANA
1725 MAIN STREET, SUITE #209
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CERESETO, ADRIANA
Address: 4019 SANDERLINE LN
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: VP () Delete
Name: JAICHENOS, CLAUDIA
Address: 1427 PRESIDIO DR
City-St-Zip: FORT LAUDERDALE, FL 33327

Title: D () Delete
Name: GERARDI, LILIANA
Address: 16551 BLATT BLVD #206
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: ESTRADA, CLAUDINA
Address: 492 SAILBOAT CIR
City-St-Zip: WESTON, FL 33326

Title: T () Delete
Name: VALLEJO, JENNY
Address: 14911 S.W. 33 STREET
City-St-Zip: DAVIE, FL 33331

Title: D () Delete
Name: MONTANARO, MARIANNA
Address: 665 CONSERVATION DR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CERESETO, ADRIANA
Address: 4019 SANDERLING LN
City-St-Zip: WESTON, FL 33331

Title: VP (X) Change () Addition
Name: JAICHENCO, CLAUDIA
Address: 1427 PRESIDIO DR
City-St-Zip: WESTON, FL 33327

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

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

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

Title: D (X) Change () Addition
Name: MARISOL, GARCES
Address: 456 FISHTAIL TERR.
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIANA CERESETO

P

01/12/2006

Electronic Signature of Signing Officer or Director

_____ Date