2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

08-02-2005 90030 024 ****61.21
N47722

DOCUMENT # N47722

1. Entity Name
INTERNATIONAL WOMEN'S FORUM, INC.

FILED
05 AUG -2 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
500591274

07132005 Chg-NP CR2E037 (10/03)

Principal Place of Business	Mailing Address
1601 S. MIAMI AVENUE MIAMI, FL 33129 US	1601 S. MIAMI AVENUE MIAMI, FL 33129 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0329792 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PARKS MCCABE, ARVA M 1601 S. MIAMI AVENUE MIAMI, FL 33129	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PARKS MCCABE, ARVA M 1601 S. MIAMI AVENUE MIAMI, FL 33129	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SIGARS-MALINA, JANA 5200 BLUE LAGOON DRIVE, STE 600 MIAMI, FL 331262022	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ELSER, MARSHA 44 W. FLAGLER STREET, STE 2100 MIAMI, FL 33130	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WEINTRAUB, THERESA V 100 SE 2ND AVENUE, STE 2300 MIAMI, FL 33130	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Weintraub, Teresa V-F 200 S. Biscayne Blvd. Ste. 3050 Miami, FL 33131 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BASS, HILARIE 1221 BRICKELL AVENUE MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST ZIP	D BAXTER, JO 6855 RED ROAD, STE 600 CORAL GABLES, FL 33143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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: Arva M. Parks 7/28/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #