

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00797

Entity Name: WOMEN'S CHAMBER OF COMMERCE OF MIAMI-DADE COUNTY, INC.**FILED**
Mar 17, 2021
Secretary of State
4637685631CC**Current Principal Place of Business:**2525 PONCE DE LEON BLVD.
SUITE 300
CORAL GABLES, FL 33134**Current Mailing Address:**2525 PONCE DE LEON BLVD.
SUITE 300
CORAL GABLES, FL 33134 US**FEI Number: 59-2371670****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**AGUILAR, ALEJANDRINA
2525 PONCE DE LEON BLVD.
SUITE 300
CORAL GABLES, FL 33134 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: ALEJANDRINA AGUILAR****03/17/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	IMMEDIATE PAST PRESIDENT
Name	GARCIA, AIMEE
Address	2525 PONCE DE LEON BLVD. SUITE 300
City-State-Zip:	CORAL GABLES FL 33134

Title	TREASURER
Name	AGUILAR, ALEJANDRINA
Address	2525 PONCE DE LEON BLVD. SUITE 300
City-State-Zip:	CORAL GABLES FL 33134

Title	PRESIDENT
Name	SARDUY, MONICA
Address	2525 PONCE DE LEON BLVD. SUITE 300
City-State-Zip:	CORAL GABLES FL 33134

Title	SECRETARY
Name	PLASENCIA, CATHLEEN
Address	2525 PONCE DE LEON BLVD. SUITE 300
City-State-Zip:	CORAL GABLES FL 33134

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: ALEJANDRINA AGUILAR**TREASURER****03/17/2021**

Electronic Signature of Signing Officer/Director Detail

Date