2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00797

Entity Name: WOMEN'S CHAMBER OF COMMERCE OF MIAMI-DADE

COUNTY, INC.

FILED Feb 10, 2020 Secretary of State 6134306681CC

Current Principal Place of Business:

2000 PONCE DE LEON BLVD.

SUITE #500-C1

CORAL GABLES, FL 33134

Current Mailing Address:

2000 PONCE DE LEON BLVD. SUITE #500-C1 CORAL GABLES, FL 33134 US

FEI Number: 59-2371670 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AGUILAR, ALEJANDRINA 2000 PONCE DE LEON BLVD. SUITF #500-C1 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 02/10/2020

> Date Electronic Signature of Registered Agent

> > Name

GARCIA, AIMEE

Officer/Director Detail:

Name

Title IMMEDIATE PAST-PRESIDENT Title **PRESIDENT** SUPERVILLE, DIANE

Address 2000 PONCE DE LEON BLVD. Address 2000 PONCE DE LEON BLVD.

> SUITE #500-C1 SUITE #500-C1

CORAL GABLES FL 33134 CORAL GABLES FL 33134 City-State-Zip: City-State-Zip:

Title **TREASURER** Title PRESIDENT-ELECT AGUILAR, ALEJANDRINA SARDUY, MONICA Name Name

2000 PONCE DE LEON BLVD. Address 2000 PONCE DE LEON BLVD. Address

SUITE #500-C1 SUITE #500-C1

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title **SECRETARY**

PLACENCIA, CATHLEEN Name

Address 2000 PONCE DE LEON BLVD., SUITE

500-C1

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.

Electronic Signature of Signing Officer/Director Detail