

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001505

**Entity Name:** MUJERES VALIENTES INC.

**Current Principal Place of Business:**

318 W. BRIDGERS AVE  
AUBURNDALE, FL 33823

**Current Mailing Address:**

P.O. BOX 1855  
AUBURNDALE, FL 33823

**FEI Number:** 59-3242832

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ZAPATA, RSM, ALICIA SISTER  
318 W. BRIDGERS AVE  
AUBURNDALE, FL 33823 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:** SISTER ALICIA ZAPATA, RSM

04/19/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MCGIVNEY, SL, PEARL SISTER  
Address        318 W. BRIDGERS AVE  
City-State-Zip: AUBURNDALE FL 33823

Title            TREASURER  
Name            GONZALEZ, MARIA  
Address        2828 THORNHILL RD  
City-State-Zip: WINTER HAVEN FL 33880

Title            VP  
Name            DIAZ, CARMEN  
Address        148 SUNRISE HILL LANE  
City-State-Zip: AUBURNDALE FL 33823

Title            SECRETARY  
Name            ZAPATA, RSM, ALICIA SISTER  
Address        318 W. BRIDGERS AVE  
City-State-Zip: AUBURNDALE FL 33823

Title            D  
Name            ARCINIEGA, HEIDRA  
Address        3490 AVE M NW  
City-State-Zip: WINTER HAVEN FL 33880

Title            D  
Name            LARA, LORENA  
Address        606 MAGGIE CIRCLE  
City-State-Zip: WINTER HAVEN FL 33880

Title            D  
Name            RAMIREZ, ISIDRA  
Address        313 -1ST STREET  
City-State-Zip: AUBURNDALE FL 33823

*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:** SISTER ALICIA ZAPATA, RSM

**SECRETARY**

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date