2015 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 04/22/2015

Electronic Signature of Registered Agent

Date

FILED Apr 22, 2015

Secretary of State

CC5630051113

Officer/Director Detail:

Title PRESIDENT Title TREASURER

NameMCGIVNEY, SL, PEARL SISTERNameGONZALEZ, MARIAAddress318 W. BRIDGERS AVEAddress2828 THORNHILL RD

City-State-Zip: AUBURNDALE FL 33823 City-State-Zip: WINTER HAVEN FL 33880

Title VP Title SECRETARY

Name DIAZ, CARMEN Name ZAPATA, RSM, ALICIA SISTER

Address 148 SUNRISE HILL LANE Address 318 W. BRIDGERS AVE
City-State-Zip: AUBURNDALE FL 33823 City-State-Zip: AUBURNDALE FL 33823

Title D Title C

Name ARCINIEGA, HEIDRA Name LARA, LORENA
Address 3490 AVE M NW Address 606 MAGGIE CIRCLE

City-State-Zip: WINTER HAVEN FL 33880 City-State-Zip: WINTER HAVEN FL 33880

Title D

Name RAMIREZ, ISIDRA Address 313 -1ST STREET

City-State-Zip: AUBURNDALE FL 33823

above, or on an attachment with all other like empowered.

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

SIGNATURE: SISTER ALICIA ZAPATA, RSM SECRETARY 04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date