

FILE NOW: FILING FEE IS \$61.25

FILED

Jul 23 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 715390 (1)**

1. Corporation Name  
**CUBAN WOMEN'S CLUB, INC.**



Principal Place of Business <b>970 SW 1ST STREET P.O. BOX 140133 CORAL GABLES FL 33130</b>	Mailing Address <b>970 SW 1ST STREET P.O. BOX 140133 CORAL GABLES FL 33130-1100</b>
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3. Date Incorporated or Qualified <b>10/09/1968</b>	3a. Date of Last Report <b>06/20/1996</b>
4. FEI Number <b>59-1236064</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>3191 CORAL WAY</b>	2a. Mailing Address <b>SAME</b>
21. Suite, Apt. #, etc. <b>SUITE # 61K</b>	26. Suite, Apt. #, etc.
22. City & State <b>MIAMI, FLORIDA</b>	27. City & State
23. Zip <b>33145</b>	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**NANCY MARQUEZ  
2725 SW 2ND AVE  
2575 SW 108 AVENUE  
MIAMI FL 33174**

10. Name and Address of New Registered Agent

**MARIA MARQUEZ  
2575 SW 108 AVENUE  
MIAMI, FLORIDA 33165  
FL 33165**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Maria Marquez* DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	MARQUEZ, NANCY	
STREET ADDRESS	970 SW 1ST ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	TUNON, WILMA	
STREET ADDRESS	970 SW 1ST ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	GUINNESS, IBIS A	
STREET ADDRESS	970 SE 1ST ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GARCERAN, HILDA	
STREET ADDRESS	970 SW 1ST ST	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Maria Marquez
1.3 STREET ADDRESS	2575 SW 108 AVENUE
1.4 CITY-ST-ZIP	MIAMI, FLORIDA 33165
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *IBIS A GUINNESS* DATE *14-12-97*

CR2E037 (9/96)