FILED
Jun 02, 2002 8:00 am
Secretary of State

03-11-2002 90081 023 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 715390

1. Entity Name

CUBAN WOMEN'S CLUB, INC.

Principal Place of Business	Mailing Address
1629 W. FLAGLER ST. MIAMI FL 33145 US	PO BOX 140133 CORAL GABLES FL 33114 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1236064 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DOMINGUEZ, ELSA B 7537 MUTINY AVENUE TREASURE ISLAND NORTH BAY VILLAGE FL 33141-4332	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 Wilma G. Tunon WILMA G. TUNON Vice President X 2/20/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DOMINGUEZ, ELSA B 7537 MUTINY AVENUE, TREASURE ISLAND NORTH BAY VILLAGE FL 33141-4332	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD TUNON, WILMA G 9725 NORTHWEST 52ND STREET #207 MIAMI FL 33178 D	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SANCHES LEDO, AIDA 6663 SOUTHWEST 133RD COURT MIAMI FL 33183	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ABAD, MAGALI R 2430 SOUTHWEST 18TH STREET MIAMI FL 33145-2402	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT D ENAM. LEAL 5601 Collins ave. M. Beach, FL. 33140 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER MARTA OROZCO 10251 SW Flagler Terr D MIAMI FL 33174 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wilma G. Tunon WILMA G. TUNON 2/20/02 305-642-4541

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #