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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 770675 (7)
1. Corporation Name

**GREATER MIAMI, FLORIDA, CHAPTER OF THE NATIONAL
ASSOCIATION OF WOMEN BUSINESS OWNERS, INC.**

Principal Place of Business	Mailing Address
334 MINORCA AVE. CORAL GABLES FL 33134	1000 BRICKELL AVE STE 620 MIAMI FL 33131 US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 1825 Ponce de Leon
22 City & State	27 #299
23 Zip	28 CORAL GABLES
24 Country	29 33134
	30 DADE

3. Date Incorporated or Qualified	3a. Date of Last Report
10/11/1983	06/27/1995
4. FEI Number	Applied For
59-2030736	☒ Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

GUERRA-AGUIRRE, MIRTHA
1000 BRICKELL AVE.
STE. 620
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	300001827159
83	-05/17796--01088--003
84 City	*****61.25
	85 Zip Code
	FL

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		(NOTE: Registered Agent Signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE	
	P GILLMAN, JO	14260 SW 136 ST.	MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE	
	T VAN BUSKIRK, SANDRA	2100 107TH AVE	MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE	
	S NANBUSKINK, SANDRA E	2100 NE 107 AVE.	MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE	
	T GUERRA-AGUIRRE, MIRTHA	1000 BRICKELL AVE., #620	MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE	
	PD CROSSBY, EDITH W	8245 SW 187TH TERR	MIAMI FL		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ DELETE	
	D GUERRA-AGUIRE, MARTHA	1000 BRICKELL AVE STE 620	MIAMI FL		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12					
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	☒ Change	☒ Addition
	P EMILY ENGLAND	13228 SW 108 ST	MIAMI FL 33186		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	☒ Change	☒ Addition
	VP DELANGA OUELETER	8001 GRAND CANAL AVE	MIAMI FL 33144-2144		
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	☐ Change	☒ Addition
	S TINA MORCATE VASQUEZ	11550 SW 97 AVE	MIAMI FL 33176		
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	☐ Change	☒ Addition
	T ANN TRAVIS	4371 SW 54 ST	MIAMI FL 33165		
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	☐ Change	☒ Addition
	FRANCE D SANDRA VAN BUSKIRK	11591 NW 40 CR	CORAL SPRINGS, FL 33065		
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	☐ Change	☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Sandra B. Mortham* **5-1-96** **954 753 4120**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)