2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 04, 2008 8:00 am Secretary of State

02-04-2008 90051 020 ****61.25

DOCUMENT # N00169

BROWARD COUNTY CHAPTER NATIONAL ASSOCIATION OF WOMEN BUSINESS OWNERS, INC.



Principal Place of Business 2425 E COMMERCIAL BLVD #201

Suite, Apt. #, etc.

WEINER, LAURA R., CPA

2425 E COMMERCIAL BLVD

FORT LAUDERDALE, FL 33308

the obligations of registered agent.

PD

Filing Fee is \$61.25

Due by May 1, 2008

BENDER, RACHAEL

POMPANO BEACH, FL 33060

FORT LAUDERDALE, FL 33309

3007CARAMBOLA CIRCLE S.

COCONUT CREEK, FL 33066

8095 W OAKLAND PARK BLVD.

FORT LAUDERDALE, FL 33351

319 NE 39TH AVE

SUPPE, JULIA

825 NW 61 ST.

BERZOK, KAREN

MEISTER, SUSAN

City & State

SUITE 201

SIGNATURE

10.

TITLE

TITLE

NAME

TITLE

NAME

TITLE

NAME

DILE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

FORT LAUDERDALE, FL 33308

2. Principal Place of Business - No P.O. Box #

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

Mailing Address

3. Mailing Address

City & State

Suite, Apt. #, etc

2425 E COMMERCIAL BLVD

#201

FORT LAUDERDALE, FL 33308

Country

City

9. Election Campaign Financing

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

CITY-ST-7/P

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIE

Trust Fund Contribution.

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Fort hunderdule, 7c 33309

6259 W SOURISE BLUDSTE ZEZ

JOLIE, IDANA

Sunrise, 74 33313

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Juliu Ture and Typed or Printed Name of Sys INFOFFICER OR DIRECTOR

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