2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N00797

Entity Name: WOMEN'S CHAMBER OF COMMERCE OF MIAMI-DADE COUNTY, INC.

Current Principal Place of Business:

PLAZA 51-225
444 BRICKELL AVE
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

PLAZA 51-225
444 BRICKELL AVE
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 59-2371670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAMIAN, MELANIE
1000 BRICKELL AVENUE
1020
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MELANIE, DAMIAN
Address: 1000 BRICKELL AVENUE, SUITE 1020
City-St-Zip: MIAMI, FL 33131

Title: VP ( ) Delete
Name: JANICE, GONZALES
Address: 1000 BRICKELL AVENUE, SUITE 1020
City-St-Zip: MIAMI, FL 33131

Title: SD ( ) Delete
Name: RIESBERG, BARBARA
Address: 1000 BRICKELL AVENUE, SECOND FLOOR
City-St-Zip: MIAMI, FL 33131

Title: TD ( ) Delete
Name: LARIAS, ANA
Address: 1001 BRICKELL BAY DRIVE, 9TH FL
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: JANICE, GONZALEZ
Address: 1000 BRICKELL AVENUE, SUITE 1020
City-St-Zip: MIAMI, FL 33131

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HANNAH BRADLEY MS. 03/25/2009

Electronic Signature of Signing Officer or Director — Date