2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000008079

Entity Name: THE WOMEN'S CAUCUS, INC.

FILED Sep 13, 2002 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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C/O CHRISTINE MARTIN C/O Y. CHRISTINE STROY-MARTIN 99 NW 183RD ST STE 118 99 NW 183RD ST STE 118 MIAMI, FL 33169

MIAMI, FL 33169

Current Mailing Address: New Mailing Address:

C/O CHRISTINE MARTIN C/O CHRISTINE STROY-MARTIN 99 NW 183RD ST STE 118 99 NW 183RD ST STE 118 MIAMI, FL 33169 MIAMI, FL 33169

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARTIN, CHRISTINE STROY-MARTIN, Y. CHRISTINE 99 NW 183RD ST 99 NW 183RD SŤ MIAMI, FL 33169 SUITE 118 MIAMI, FL 33169 US

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: Y. CHRISTINE STROY-MARTIN 09/13/2002

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition JONES, SANDRA E Name: Name:

Address: 7200 NW 22ND AVE Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip:

Title: DST () Delete Title: (X) Change () Addition MARTIN, CHRISTINE Name: Name: STROY-MARTIN, Y. CHRISTINE Address: 99 NW 183RD ST STE 118 Address: 99 NW 183RD ST STE 118 City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169

Title: () Delete Title: () Change () Addition

DAVENPORT, STANLEY Name: Name: 8352 NE 2ND AVE Address: Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: Y. CHRISTINE STROY-MARTIN DST 09/13/2002