

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-04-2003 90128 045 ****61.25

DOCUMENT # N02000005203

1. Entity Name

ASOCIACION INTERNACIONAL DE MUJERES, TIERRA FERTIL, INC.



Principal Place of Business
**4986 SW 123RD TERRACE
COOPER CITY FL 33330**

Mailing Address
**4986 SW 123RD TERRACE
COOPER CITY FL 33330**

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

01-0732856

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BAEZA, HANNIA
4986 SW 123RD TERRACE
COOPER CITY FL 33330**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent 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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BAEZA, HANNIA**
STREET ADDRESS **4986 SW 123RD TERRACE**
CITY-ST-ZIP **COOPER CITY FL 33330**

TITLE **T** ☒ Delete
NAME **VELASQUEZ, INDIRA B**
STREET ADDRESS **960 WEST 81ST ROAD**
CITY-ST-ZIP **HALEAH FL 33014**

TITLE **S** ☐ Delete
NAME **SANDOVAL, ANGELA**
STREET ADDRESS **1715 NORTH 17TH COURT**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **SANDOVAL ANGELA**
STREET ADDRESS **1715 NORTH 17TH COURT**
CITY-ST-ZIP **HOLLYWOOD, FL 33020** "D"

TITLE ☐ Change ☒ Addition
NAME **YILKA FALLAS**
STREET ADDRESS **111 NW 8th AVE #B3**
CITY-ST-ZIP **HALLANDALE, FL 33009** "D"

TITLE ☐ Change ☒ Addition
NAME **EVELYN VITE**
STREET ADDRESS **701 NW 67th AVE**
CITY-ST-ZIP **HOLLYWOOD, FL 33024** "D"

TITLE ☐ Change ☒ Addition
NAME **YOLANDA RIVAS**
STREET ADDRESS **17455 NW 67 CT #B**
CITY-ST-ZIP **MIAMI, FL 33015** "D"

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: **Hannia Baeza**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/02/03

Date

(954) 689-4706

Daytime Phone #

CR2037 (10/02)