2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15378

FILED Apr 30, 2009 Secretary of State

Entity Name: WOMEN'S HISTORY COALITION OF MIAMI-DADE COUNTY, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
12420 SW 112 AVE MIAMI, FL 33176 Current Mailing Address:				3611 POINCIANA AVENUE MIAMI, FL 33133 New Mailing Address:		
			New Maili			
P.O. BOX MIAMI, FL						
FEI Number	r: 59-2710059	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
SLAMA, MARGARET 12420 SW 112 AVENUE MIAMI, FL 33176 US			8401 SW 1	TANG, WINNIE 8401 SW 107 AVE 254E MIAMI, FL 33173 US		
	e named entity e of Florida.	submits this statement for the pur	oose of changing i	ts registered office or registered agent, or both		
SIGNATURE: WINNIE TANG				04/30/2009		
	Electro	nic Signature of Registered Agent		Date		
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	S (GRAFTON, MA 3611 POINCIA MIAMI, FL 33	NA AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Name: Address:	GRAFTON, MA 3611 POINCIA MIAMI, FL 331	RTY NA AVENUE 133) Delete SY E BLVD #1603	Name: Address:	()Change ()Addition ()Change ()Addition		
Name: Address: City-St-Zip: Title: Name: Address:	GRAFTON, MA 3611 POINCIA MIAMI, FL 33' P (KAPLAN, BETS 2 GROVE ISLE MIAMI, FL 33'	RTY NA AVENUE 133) Delete SY E BLVD #1603 133) Delete BARET	Name: Address: City-St-Zip: Title: Name: Address:			
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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: WINNIE TANG D 04/30/2009