

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20167

1. Entity Name

WOMEN OF SPANISH ORIGIN, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90067 041 ****61.25

Principal Place of Business

Mailing Address

P O BOX 8208
CORAL SPRINGS FL 33075

P O BOX 8208
CORAL SPRINGS FL 33075-8208

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0066878

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAMIREZ, ROCIO
2879 N. ROCK ISLAND ROAD
APT 101
CORAL SPRINGS FL 33063

Name LUCIA ALVAREZ

Street Address (P.O. Box Number is Not Acceptable)

11026 NW 2nd St.

City CORAL SPRINGS FL

Zip Code 33071

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.

SIGNATURE LUCIA ALVAREZ

Lucia Alvarez

May 1st 2000

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	RAMIREZ, ROCIO	
STREET ADDRESS	2879 N. ROCK ISLAND ROAD APT #101	
CITY-ST-ZIP	CORAL SPRINGS FL 33063	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	GARTNER, BLANCA	
STREET ADDRESS	5073 N.W. 103 AVE.	
CITY-ST-ZIP	CORAL GABLES FL 33076	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ROBLES, M C	
STREET ADDRESS	4331 N.W. 101ST DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	ALVAREZ, LUCIA	
STREET ADDRESS	11026 N.W. 2ND STREET	
CITY-ST-ZIP	CORAL GABLES FL 33071	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	AYALA, NORA	
STREET ADDRESS	4330 N.W. 101 DR.	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BRANA, MARLENE	
STREET ADDRESS	5609 NW 61ST AVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	

TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Alvarez Lucia	
STREET ADDRESS	11026 NW 2nd St. Coral Springs	
CITY-ST-ZIP	33071	
TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lourdes Vera	
STREET ADDRESS	13072 NW 11 Court	
CITY-ST-ZIP	Sunrise, FL 33323	
TITLE	Sofia Kostopoulos	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8549 NW 57 D	
STREET ADDRESS	Coral Springs, FL 33067	
CITY-ST-ZIP		
TITLE	S Cecilia Sacasa	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9680 N.W. 58 Court	
STREET ADDRESS	Parkland FL 33076	
CITY-ST-ZIP		
TITLE	D M.C. ROBLES	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4331 N.W. 101 Drive	
STREET ADDRESS	CORAL SPRINGS, FL 33065	
CITY-ST-ZIP		
TITLE	D Rocio Ramirez	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2879 N. ROCK ISLAND, APT. 101	
STREET ADDRESS	CORAL SPRINGS, FL 33063	
CITY-ST-ZIP		

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: *Lucia Alvarez* BELUCIA ALVAREZ 5-01-00 (954) 753-3131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

N20167

102190

LIST OF OFFICERS AND DIRECTORS 1999-2000

OFFICERS:

LUCIA ALVAREZ	PRESIDENT
MARIA FERNANDA NEIRA	VICE-PRESIDENT
LOURDES VERA	WAYS & MEANS
LALY VARGAS	PROGRAMS
GINA OTTEN	PUBLIC RELATIONS
CECILIA SACASA	SECRETARY
GLADYS CASTRO	TREASURER

DIRECTORS:

MARIA CRISTINA ROBLES

HILDA PRIGGE

JOSEFINA RODRIGUEZ

AURA CARDENAS

ROCIO RAMIREZ

N 20167

102140

LIST OF OFFICERS AND DIRECTORS 2000-2001

OFFICERS:

LUCIA ALVAREZ

PRESIDENT

LOURDES VERA

VICE-PRESIDENT

NORA AYALA

WAYS & MEANS

MARIA FERNANDA NEIRA

PROGRAMS

GINA OTTEN

PUBLIC RELATIONS

ROCIO RAMIREZ

SECRETARY

SOFIA KOSTOPOULOS

TREASURER

DIRECTORS:

MARTHA VARGAS

CONSUELO PENIZA

LALY VARGAS

LOURDES GREENWOOD

LILIANA RUIZ