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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N34218 (0)

1. Corporation Name

ASOCIACION DE DAMAS PUERTORRIQUENAS INC.

Principal Place of Business	Mailing Address
C/O NANCY OSBORNE P.O. BOX 77-0504 CORAL SPRINGS FL 33077	C/O NANCY OSBORNE P.O. BOX 77-0504 CORAL SPRINGS FL 33077-0504

3. Date Incorporated or Qualified: 09/15/1989
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business	2a. Mailing Address
21 C/O RUTH TOROKER	26 C/O RUTH TOROKER
Suite, Apt. #, etc. 22 P.O. Box 77-0504	Suite, Apt. #, etc. 27 P.O. Box 77-0504
City & State 23 CORAL SPRINGS FL.	City & State 28 CORAL SPRINGS FL.
Zip / Country 24 33077 / 25	Zip / Country 29 33077 / 30

4. FEI Number: 65-0148000 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LYDIA VARGAS 8112 N.W. 73RD TERRACE TAMARAC FL 33321	81 Name: TOROKER RUTH 82 Street Address (P.O. Box Number is Not Acceptable): 5921 N.W. 99 AVE 83 84 City: PARKLAND FL 85 Zip Code: 33076

11. Pursuant to the provisions of Sections 617.0502 and 617.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Ruth Toroker Ruth Toroker 4/30/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VARGAS, LYDIA 8112 N.W. 73RD TERRACE TAMARAC FL	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P TOROKER, RUTH 5921 N.W. 99 AVE PARKLAND FL 33076	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RIVERA, IVETTE 3828 WILDERNESS WAY CORAL SPGS FL	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D RODRIGUES, GIANNA 11682 N.W. 13TH MANOR CORAL SPRINGS FL. 33071	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TOROKER, RUTH 5921 N.W. 99TH AVENUE PARKLAND FL	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D ZEEGER, ANNIE 7207 N.W. 43RD ST. CORAL SPRINGS, FL 33065	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FLECHA, ILEANA 22185 MARTELLA AVENUE BOCA RATON FL	☑ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D GREENWOOD, LOURDES 3800 N.W. 116TH ST. SUNRISE FL 33323	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ruth Toroker Ruth Toroker 4/30/97 (954)345-4686
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0026267