

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



姓名：_____
 学号：_____
 班级：_____
 日期：____年__月__日

APPROVED
AND
FILED

17:59:17 17:59

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N39898

(4)

ASSOCIATION OF COMMERCIAL REAL ESTATE WOMEN, INC.

Principal Office Address		Mailing Address		DO NOT WRITE IN THIS SPACE	
% JOANN SOMAN 2665 S. BAYSHORE DR 1002 MIAMI FL 33133		% JOANN SOMAN 2665 S. BAYSHORE DR 1002 MIAMI FL 33133		3. Date incorporated or qualified 09/07/1990	
				3a. Date of Last Report 05/01/1994	
				4. FFI Number 65-0220883	
				Applied For ☐ Not Applicable	
2. Principal Place of Business 21 Delayne Sigerman		2a. Mailing Address 26 First Commercial Realty, Inc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
State, Apt # etc 22 7555 NW 12 St. #119		State, Apt # etc 27 7855 NW 12 St. #218		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
City & State 23 Miami, Florida		City & State 28 Miami, Florida		7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required	
Zip 24 33126		Zip 29 33126		8. This corporation has liability for intangible tax under S. 199.032. Florida Statutes ☐ Yes ☒ No	
Country 25 Dade		Country 30 Dade			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LINDA SINGER 2701 S. BAYSHORE DR SUITE 305 MIAMI FL 33131				81 Name Delayne Sigerman	
				82 Street Address (P.O. Box Number is Not Acceptable) c/o First Commercial Realty, Inc.	
				83 7955 NW 12 St. #119	
				84 City Miami	
				FL	
				85 Zip Code 33126	
11. Pursuant to the provisions of Sections 607.01(2) and 607.1508, 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 607.0505, Florida Statutes.					
SIGNATURE: <i>Delayne Sigerman / President</i> <i>Delayne Sigerman</i> <i>4/25/95</i>					
12. OFFICERS AND DIRECTORS			13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE 14 DV	NAME ELAINE INEZ ROSTON		TITLE 15 DV	NAME Joann Soman	
STREET ADDRESS 801 BRICKLE AVE STE 900			STREET ADDRESS 2665 S. Bayshore Dr. #1002		
CITY, ST, ZIP MIAMI FL 33131			CITY, ST, ZIP Miami, FL. 33133		
TITLE 16 DP	NAME PATRICIA BIRCH J		TITLE 17 DP	NAME Delayne Sigerman	
STREET ADDRESS 9100 S. DADELAND BLVD STE 1700			STREET ADDRESS 7955 NW 12 St. #119		
CITY, ST, ZIP MIAMI FL			CITY, ST, ZIP Miami, FL. 33126		
TITLE 18 DT	NAME MONTEGINS, MINETTE I		TITLE 19 DT	NAME Nancy Pastroff	
STREET ADDRESS 2601 S. BAYSHORE DR STE 1700			STREET ADDRESS 10300 Sunset Drive - Suite 135		
CITY, ST, ZIP MIAMI FL 33133			CITY, ST, ZIP Miami, FL. 33173-3038		
TITLE 20 DS	NAME CHAPINA, LORI		TITLE 21 DS	NAME Lori Chupina	
STREET ADDRESS 2601 S. BAYSHORE DR 1700			STREET ADDRESS 250 Catalonia Ave. #506		
CITY, ST, ZIP MIAMI FL			CITY, ST, ZIP Coral Gables, FL. 33134		
TITLE 22 D	NAME SINGER, LINDA G.		TITLE 23 D	NAME Sally Richardson	
STREET ADDRESS 2701 S. BAYSHORE DR STE 305			STREET ADDRESS 1500 Miami Center		
CITY, ST, ZIP MIAMI FL 33133			CITY, ST, ZIP Miami, FL. 33131		
TITLE 24 D/S	NAME JOY MCKENNA		TITLE 25	NAME	
STREET ADDRESS 104 CRADON BLVD STE 300			STREET ADDRESS		
CITY, ST, ZIP KEY BISCAYNE FL 33049			CITY, ST, ZIP		
14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the incorporation stated in Sections 130.01(2)(b) Florida Statutes. Further, I certify that the information included 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 manager or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 1, or Block 1a, of the report, or on an attachment with an address.					
SIGNATURE: <i>Delayne Sigerman</i> <i>Delayne Sigerman</i> <i>4/25/95</i> (305) 590-1500					