FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

Principal Place of Business

2. Principal Place of Business

SIGNATURE:

MIAMI BEACH FL 33139

210 2ND ST.

N93000001049 (6)

Mailing Address
P. O. BOX 191233

2a. Mailing Address

MIAMI BEACH FL 33119-1233

WOMEN OF MIAMI BEACH, INC.

65-0421539 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes X No 24 30 Florida Statutes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MIGURA KICHARD LEWIS, ELSE Street Address (P.O. Box Number is Not Acceptable) 82 LENOX AUENNE 3443 N. MERIDIAN AVE R3 #810 MIAMI BEACH FL 33140 84 City BEACH IAMI 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. ed agent and title if applicable FIGURA. ADMINISHEARINE SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 96/6) TITLE DELETE 1.1 TITLE Change RICHARD A. FIGURA NAME ROGOFF, ARLENE MSN 12 NAME B38 CENER AVENUE, 1.3 STREET ADDRESS STREET ADDRESS 120 RIVO ALTO DRIVE MIAMI BEACH FL 33140 1.4 CITY - ST - ZIP CITY-ST-ZIF Addition TITLE ☐ DELETE 2.1 TITLE Change ARDITO, AMAL 22 NAME NAME 210 2ND STREET 2.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE **GURWITCH, SHIRLEY** 32 NAME NAME 2525 SUNSET DRIVE STREET ADDRESS 3.3 STREET ADDRESS CITY - ST-Z#P MIAMI BEACH FL 33119-0156 3.4. CITY-ST-ZIP Change DELETE Addition 4.1 TITLE TITLE APTHEER JAU NAME MAIZLISH, GISELLA 4. 2 NAME 735 HTH FLACE. 3411 INDIAN CREEK DRIVE 4.3 STREET ADDRESS STREET ADDRESS 33159 MIAMI BEACH FL 33140 CITY-ST-ZIF 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE SUSAN CRUZ PEARSON, LINNEA 5.2 NAME NAME 4/621 1200 WEST 301 OCEAN DRIVE 5.3 STREET ADORESS STREET ADDRESS 33139 MIAMI BEACH FL 33139 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 6.1 TITLE Change Addition TITLE D NAME AYER, GENIE 6.2 NAME 9585 COLLINS AVE., #2214 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP SURFSIDE FL 33154 CITY-ST-ZIP 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.

RELIEVE A. FIGURA, &

FILED Feb 06 1997 8:00am Secretary of State

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3a. Date of Last Report

09/06/1996

Applied For

3. Date incorporated or Qualified

02/22/1993

4. FEI Number