

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004070

FILED
Mar 18, 2004
Secretary of State

Entity Name: WOMEN FIGHTERS FOR DEMOCRACY, CORP.

Current Principal Place of Business:

12982 SW 27TH ST
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

12982 SW 27TH ST
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-0526181 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARQUEZ, MARIA
12982 SW 27TH ST
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MARQUEZ, MARIA D
Address: 12982 SW 27 STREET
City-St-Zip: MIAMI, FL 33175

Title: VPSD () Delete
Name: MORAVIA CAPO,
Address: 925 NW 37TH AVE APT 1066
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: LARDIEZ, ELVIRA M
Address: 6850 CASSIA PL
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIA MARQUEZ

PTD

03/18/2004

Electronic Signature of Signing Officer or Director

_____ Date