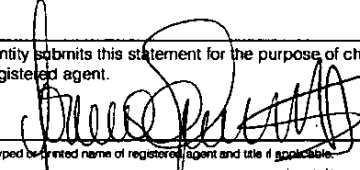
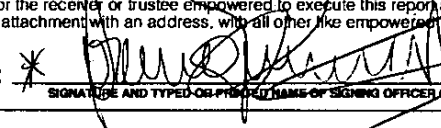


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90320 008 ****70.00

DOCUMENT # N98000000870					
1. Entity Name ASOCIACION DE MUJERES HISPANAS CONTRA LA DISCRIMINACION Y LA VIOLENCIA DE GENERO CORPORATION					
Principal Place of Business 438 NE 35 TERR MIAMI, FL 33137			Mailing Address 2121 PONCE DE LEON BLVD 240 CORAL GABLES, FL 33134		
2. Principal Place of Business		3. Mailing Address 21011 NE 38 AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Aventura - FL			
Zip	Country	Zip 33180	Country EE.UU	4. FEI Number 65-0820695	
5. Certificate of Status Desired ☒				Applied For Not Applicable	
8. Name and Address of Current Registered Agent PRATS, GABRIEL 2121 PONCE DE LEON BLVD. SUITE 240 CORAL GABLES, FL 33134				7. Name and Address of New Registered Agent Name: Lorena Garcia Street Address (P.O. Box Number is Not Acceptable) 21011 NE 38 AVE City: Aventura FL Zip Code: 33180	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE * 			DATE: 04/12/2005		
Filing Fee is \$61.25 Due by May 1, 2005			9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees		
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DE LUSINCHI, BLANCA IBAÑEZ 438 NE 35 TERR MIAMI, FL 33137		☐ Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD GARCIA, LORENA 438 NE 35 ST MIAMI, FL 33137		☐ Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZAMBRANO, GLORIA 438 NE 35 TERR MIAMI, FL 33137		☐ Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD De Lusinchí, Blanca Ibañez 438 NE 35 terrace, MIAMI FL 33137		☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition		
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: * 			DATE: 04/12/2005 (305) 573.6338		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					