2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 20, 2004 8:00 am Secretary of State 02-20-2004 90014 002 ****61.25

	MENT # N9900000	3 4 3 I					
1. Entity Nam	AST MIAMI WOMAN'S CLI	UB, INC.					
Principal Place 454 NE 58Th MIAMI, FL :33	TS H	Mailing Address 454 NE 58TH ST MIAMI, FL 33137		1	9401	8550	
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2. Principal P	lace of Business	3. Mailing Address	•				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		01302004 CI	ng-NP CR2E037 (10/0	03)	
City & State		City & State		4. FEI Number 59-066062	7 .	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	Additional	
	6. Name and Address of Curren	t Registered Agent	1	7. Name and Add	ress of New Registered Agent	1	
			Name				
SIPOS, ANDREW L JR. ESQ 250 BIRD ROAD, STE. 302 CORAL GABLES, FL 33146			Street	Street Address (P.O. Box Number is Not Acceptable)			
. ú		_	City		FL Zip	Code	
	named entity submits this statement f	or the purpose of changing it	ts registered office	or registered agent, or both, in	<u> </u>	with, and accept	
the obligat	tions of registered agent.						
SIGNATURE		*					
SIGNATORE :	Signature, typed or printed name of registered ager	nt and title if applicable. (NC	TE: Registered Agent sign.	ature required when reinstating)	DATE		
Sidifatorie	Filing Fee is \$61.25	9. Election Ca	ampaign Financing	\$5.00 May Be	Make check paya		
;	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Ca Trust Fund	ampaign Financing Contribution.	\$5.00 May Be Added to Fees	Make check paya Florida Department	of State	
10.	Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND D	9. Election Ca Trust Fund	ampaign Financing Contribution.	\$5.00 May Be Added to Fees	Make check payal Florida Department ES TO OFFICERS AND DIRECTOR	of State	
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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.