## FILE NOW: FILING FEE AFTER MAY 1ST IS 550.00

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMIT OF STATE

Sandra B. #tham

Secretary state DIVISION OF COLORATIONS

DOCUMENT #
1. Corporation Name P96000055170 (0)

WOMEN'S JUSTICE CENTER OF MIAMI, INC.

**FILED** May 15 1998 8:00am Secretary of State



412298

| Principal Place                        | e of Business  | Mailing Address   | ri.  |  |                              |                  |  |
|--|--|---|--|--|------------------------------|------------------|--|
| 8321 SW 14TH ST POST OFFICE BOX 144556 |  | ,   |  |  |                              |                  |  |
| MAMIFL 33144<br>US                     |  | US  | CORAL GABLES FL 33134<br>US                        |  | DO NOT WRITE IN THIS SPACE   |                  |  |
|  |  |   |  | 3. Date Incorporated or Qualified  |                              |                  |  |
|  |  |   |  | 06/26/1996   | - I App                      | lied For         |  |
| 2. Principal Pi                        | ace of Business  | 2a. Mailing Address   | 11000  | 4, FEI Number  | 1 <del>-1</del> -            | Applicable       |  |
| 21 3134                                | PONCE DE LEON BLV  |   | 4253   | 65-0703568   | ¢9.75 A                      |                  |  |
| Suite, Apt.                            | #, <b>6</b> IC.  | Suite, Apt. #, etc.   | 1  | 5. Certificate of Status Desired   | Fee Req                      |                  |  |
| 22<br>City & State                     | Δ  | City & State  |  | 6. Election Campaign Financing   | \$5.00 N                     | May Be           |  |
|  | GABLES, FL.  | 28 CORAL GAS  | ZS FL.   | Trust Fund Contribution  | of bebba                     | Fees             |  |
| Zip                                    | Country  | Zip   | Country  | 8. This corporation owes or has pa   | id the current year Intar    | ngible           |  |
| 24 33134                               | <b>↓</b> 25  | 29 33134 3  |  | Personal Property Tax due June   |                              | No               |  |
|  | g, Name and Address of Curren  |   |  | 10. Name and Address of New Re   | gistered Agent               |                  |  |
| GUI                                    | TIAN, MARIA A ESQ.   |   | 81 Name  | AWN EURINGER   | <del>,</del>                 |                  |  |
|  | PONCE DE LEON BLVD., SUITE   | 506   | 82 Street Add                                      | ress (P.O. Box Number is Not Acceptar  | Blvd.                        |                  |  |
| COL                                    | RAL GABLES FL 33144  |   | 31   | 32 Ponce de Leo  | v Diva.                      |                  |  |
|  |  |   | 83   |  |                              |                  |  |
|  |  |   | 84 City  | C 1 1 0  | FL 85 33                     | ode C            |  |
|  |  |   | Cc   | RAL CABCO  |                              | registered       |  |
| 11. Pursuant t                         | to the provisions of Sections 607.050;<br>egistered agent, or both, in the State | 2 and 607.1508, Flori <b>da Stat</b> utes<br>of Florida, Such change was au | the above-named cor<br>porized by the corpora      | poration submits this statement for the pation's board of directors. I hereby acce   | pt the appointment as r      | egistered        |  |
| agent. I a                             | m familiar with, and accept the obliga   | tions of, Section 607.0505, Flori   | a Statules.  | 63 .   | Alelac                       | Ì                |  |
| SIGNATURE                              | DAWN EURI  | VGER  | g stered Agent signature requ                      | un currenger   | DATE                         |                  |  |
| 12,                                    | Signature, typed or printed name of registered age<br>OFFICERS AND               |   | 13.  | ADDITIONS/CHANGES TO OFFI  | CERS AND DIRECTORS           | S IN 12 Addition |  |
| TITLE                                  | P  | DELETE  | 1.1 TITLE  |  | Change                       | Addition         |  |
| NAME                                   | EURINGER, DAWN ESQ.  |   | 1.2 NAME   |  |                              | 1                |  |
| STREET ADDRESS                         | 8321 S.W. 14TH STREET  |   | 1,3 STREET ADDRESS                                 |  |                              | i                |  |
| CITY-ST-ZIP                            | MIAMI FL 33144   |   | 1.4 CiTY-ST-ZIP                                    |  |                              |                  |  |
| TITLE                                  | V  | DELETE  | 2.1 TITLE  |  | Change                       | Addition         |  |
| NAME                                   | GUITIAN, MARIA A ESQ.  |   | 2.2 NAME   |  |                              |                  |  |
| STREET ADDRESS                         | 8321 S.W. 14TH STREET  |   | 2.3 STREET ADDRESS                                 |  |                              |                  |  |
| CITY-ST-ZIP                            | MIAMI FL 33144   |   | 2.4 CITY-ST-ZIP                                    |  | Change                       | Addition         |  |
| TITLE                                  |  | ☐ DELETE  | 3.1 TITLE  |  | — Crange                     | □ vanisan        |  |
| NAME                                   |  | )   | 3.2 NAME   |  |                              | İ                |  |
| STREET ADDRESS                         |  |   | 3.3 STREET ADDRESS                                 |  |                              | j                |  |
| CITY-ST-ZIP                            |  |   | 3.4. CITY - ST - ZIP                               |  | Change                       | Addition         |  |
| TITLE                                  |  | L] DELETE   | 4,1 TITLE  |  | موسین ہے                     |                  |  |
| NAME                                   |  |   | 4. 2 NAME  |  |                              | -                |  |
| STREET ADDRESS                         |  |   | 4 3 STREET ADDRESS                                 |  |                              | İ                |  |
| CITY-ST-ZIP                            |  | There !   | 4.4 CITY - ST - ZIP                                |  | Change                       | Addition         |  |
| TITLE                                  |  | DELETE :  | 5.1 TITLE  |  |                              | ļ                |  |
| NAME<br>AMPER A DOORS                  |  |   | 5.2 NAME   |  |                              |                  |  |
| STREET ADDRESS                         |  | <u>f</u> .  | 5.3 STREET ADDRESS                                 |  |                              |                  |  |
| CITY-ST-ZIP<br>TITLE                   |  | □ r AFF   | 5.4 CITY-ST-ZIP<br>6.1 TITLE                       |  | Change                       | Addition         |  |
|  |  |   | 6.2 NAME   |  |                              | +                |  |
| NAME<br>ethert anneces                 |  | 7   | 63 STREET ADDRESS                                  |  |                              |                  |  |
| STREET ADDRESS                         |  | <b>9</b> -  | CACITY OF 710                                      |  |                              |                  |  |
| 14.   hereby c                         | certify that the information supplied wi   | th this filing doc as not qualify fo  |  | in Section 119.07(3)(i). Florida Statutes  | . I further certify that the | e information    |  |
| indicated                              | on this annual report or supplementa   | l annual report is true and acci  | urate and that my sign<br>execute this report as r | ature shall have the same legal effect as<br>equired by Chapter 607, Florida Statute | s; and that my name as       | pears in         |  |
| Block 12                               | or <b>Block</b> 13 if changed, or on an allac                                    | chment with as radioress.   | Moone and report to                                | 1  |                              |                  |  |
| l                                      | · ·  | (_/ ~   |  | 11.000   |                              |                  |  |