

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001847

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: DIRECT HELP TO EASTERN EUROPE, INC.

**Current Principal Place of Business:**

207 ORTIZ BLVD  
NORTH PORT, FL 34287 US

**New Principal Place of Business:**

**Current Mailing Address:**

207 ORTIZ BLVD  
NORTH PORT, FL 34287 US

**New Mailing Address:**

FEI Number: 36-3864285      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NAZARIAN, ELIZABETH  
207 ORTIZ BLVD  
NORTH PORT, FL 34287 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: P ( ) Delete  
Name: NAZARIAN, ELIZABETH  
Address: 207 ORTIZ BLVD  
City-St-Zip: NORTH PORT, FL 34287

Title: S ( ) Delete  
Name: NAZARIAN, ANIA  
Address: 329 SAN CARLOS AVE  
City-St-Zip: NORTH PORT, FL 34287

Title: D ( ) Delete  
Name: KRAWIEC, GRZEGORZ  
Address: 9883 SORENG AVE.  
City-St-Zip: SHILLER PARK, IL 60176

Title: D ( ) Delete  
Name: WOSIEK, ZOFIA  
Address: 5559 W LELAND AVE  
City-St-Zip: CHICAGO, IL 60630

Title: D ( ) Delete  
Name: NAZARIAN, ISZCHAN  
Address: 207 ORTIZ BLVD  
City-St-Zip: NORTH PORT, FL 34287

Title: VP ( ) Delete  
Name: GESLOWSKI, GRACE  
Address: 141 NORTHWEST POINT BLVD  
City-St-Zip: ELK GROVE VILLAGE, IL 60007

**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:

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 exemption stated in Chapter 119, 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: ELIZABETH NAZARIAN

P

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date