

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 16, 2004
Secretary of State**

DOCUMENT# N00000004672

Entity Name: HOSANNA HELPING HAND, INC.

Current Principal Place of Business:

995 NE 124TH STREET
SUITE 200
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

995 NE 124TH STREET
SUITE 200
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 65-1008837 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAINTUS, STEVE
6510 SW 30TH STREET
MIRAMAR, FL 33023 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: PD () Delete
Name: SAINTUS, STEVE
Address: 6510 SW 30 ST
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: ALEXIS, GABRIELLE
Address: 4715 NW 58TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D () Delete
Name: MADDY, CAMELO
Address: 7085 NW 173RD DRIVE #403
City-St-Zip: MIAMI, FL 33015

Title: D (X) Delete
Name: BENOIT, ANNA P
Address: 280 NE 172ND STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: D () Delete
Name: SAINTUS, ESTHER
Address: 6510 SW 30 STREET
City-St-Zip: MIRAMAR, FL 33023

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:

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: STEVE SAINTUS

P

11/16/2004

Electronic Signature of Signing Officer or Director

Date