

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002806

FILED
Apr 26, 2007
Secretary of State

Entity Name: MINORITY HELP, INC

Current Principal Place of Business:

1145 SW 1ST WAY
DEERFIELD BEACH, FL 334416640 US

New Principal Place of Business:

Current Mailing Address:

1145 SW 1ST WAY
DEERFIELD BEACH, FL 334416640 US

New Mailing Address:

FEI Number: 20-2523891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAIDE, ALVANIA V
4624 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064 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: SAIDE, ALVANIA V
Address: 4624 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: S () Delete
Name: GENTILE, LUCIANA F
Address: 6133 NW 45TH AVE
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: ESQ. () Delete
Name: MORANO, MICHAEL S
Address: 318 S DIXIE HWY
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: D () Delete
Name: DEMOURA, VALMIR
Address: 9058 SW 1ST DRIVE
City-St-Zip: BOCA RATON, FL 33428 US

Title: D () Delete
Name: SALLES, CARLOS
Address: 1020 NE 12TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: D () Delete
Name: CRUZ, ELISETTE
Address: 5340 NW 55TH BLVD #305
City-St-Zip: COCONUT CREEK, FL 33073 US

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: D (X) Change () Addition
Name: MORAIS, ALESSANDRA
Address: 5025 NW 11TH WAY
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: D (X) Change () Addition
Name: SALLES, CARLOS
Address: 1414 NE 5TH TERRACE #1
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: D (X) Change () Addition
Name: CRUZ, ELISETTE
Address: 1001 E SAMPLE RD #W8
City-St-Zip: POMPANO BEACH, FL 33064 US

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: ALVANIA VIVIANE SAIDE

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date