

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 04, 2004
Secretary of State**

DOCUMENT# N01000006826

Entity Name: HANDS THAT HELP, INC.

Current Principal Place of Business:

4980 N.W. 32ND AVENUE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

4980 N.W. 32ND AVENUE
MIAMI, FL 33142

New Mailing Address:

FEI Number: 04-3587871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, ISAAH G
4980 NW 32 AVE
MIAMI, FL 33142 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: PTD () Delete
Name: DANIELS, ISAAH G
Address: 4980 N.W. 32ND AVENUE
City-St-Zip: MIAMI, FL 33142

Title: VD () Delete
Name: KEMP-DANIELS, TONYA
Address: 4980 N.W. 32ND AVENUE
City-St-Zip: MIAMI, FL 33142

Title: SD () Delete
Name: FUENTES, BRENDA
Address: 3855 CAREFREE CIR S
City-St-Zip: COLORADO SPRINGS, CO

Title: D () Delete
Name: NALLS, JOHN
Address: 3633 SW 14TH STREET
City-St-Zip: FT LAUDERDALE, FL 33312

Title: D () Delete
Name: JACKSON, CURTIS
Address: 2000 SW 97TH LN
City-St-Zip: FT LAUDERDALE, FL 33324

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:

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: ISAAH G. DANIELS

PTD

08/04/2004

Electronic Signature of Signing Officer or Director

Date