

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718051

Entity Name: HERE'S HELP, INC.

Current Principal Place of Business:

15100 N.W. 27TH AVENUE
OPA LOCKA, FL 33054

Current Mailing Address:

15100 N.W. 27TH AVENUE
OPA LOCKA, FL 33054 US

FEI Number: 59-1298067

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON-WATSON, JULIE
2470 NE 23RD STREET
POMPANO BEACH, FL 33062 US

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

Officer/Director Detail :

Title TD
Name BOOTH, RICHARD
Address 4405 GRANADA BLVD.
City-State-Zip: CORAL GABLES FL 33146

Title PD
Name WILSON-WATSON, JULIE
Address 2470 NE STREET
City-State-Zip: POMPANO BEACH FL 33062

Title SD
Name MENDEZ, IGNACIO
Address 13000 NW 42ND AVENUE
City-State-Zip: MIAMI FL 33054

Title D
Name BADIA, JOSEPH
Address 1400 NW 93RD AVENUE
City-State-Zip: MIAMI FL 33172

Title D
Name GUTIERREZ, ARMANDO
Address 1350 NW 8TH CT. PH7
City-State-Zip: MIAMI FL 33136

Title D
Name RIVERA, MAGGIE
Address 5900 SW 85 ST.
City-State-Zip: MIAMI FL 33143

Title D
Name KROSS, JOHN
Address 15100 N.W. 27TH AVENUE
City-State-Zip: OPA LOCKA FL 33054

I hereby 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 all other like empowered.

SIGNATURE: JULIE WILSON-WATSON

PD

02/06/2019

Electronic Signature of Signing Officer/Director Detail

_____ Date