

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000001886

Entity Name: HIS HANDS EXTENDED INC.

Current Principal Place of Business:

2035 NW 46 AVE
D104
LAUDERHILL, FL 33313

Current Mailing Address:

2035 NW 46 AVE
D104
LAUDERHILL, FL 33313 US

FEI Number: 37-1778632

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLOVER, PATRICIA A
2035 NW 46 AVE
D104
LAUDERHILL, FL 33313 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 P
Name GLOVER, PATRICIA A REV
Address 2035 NW 46 AVE
D104
City-State-Zip: LAUDERHILL FL 33313

Title SEC
Name HOLMES, KIMBERLEY M
Address 1040 NW 141 ST
City-State-Zip: NORTH MIAMI FL 33161

Title VP
Name KHAN, MARTINE
Address 10341 SW 100 AVE
City-State-Zip: MIAMI FL 33176

Title DIR
Name BRINSON, MATILDA
Address P O BOX 900221
City-State-Zip: HOMESTEAD FL 33090

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: PATRICIA A GLOVER

PRESIDENT

04/12/2017

Electronic Signature of Signing Officer/Director Detail

Date