

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000020312

**Entity Name:** M & E HEALING HANDS INC

**Current Principal Place of Business:**

4129 N.E. 14TH PLACE  
CAPE CORAL, FL 33909

**Current Mailing Address:**

4129 N.E. 14TH PLACE  
CAPE CORAL, FL 33909

**FEI Number:** 27-5322303

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HERNANDEZ, MAYDEL  
4129 N.E. 14TH PLACE  
CAPE CORAL, FL 33909 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 HERNANDEZ, MAYDEL  
Address 4129 N.E. 14TH PLACE  
City-State-Zip: CAPE CORAL FL 33909

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAYDEL HERNANDEZ

P

01/17/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date