

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

0041716

DOCUMENT # N00000003819

1. Entity Name

HELPING HANDS COMMUNITY DEVELOPMENT CORPORATION

03-06-2001 90292 035 *****70.00

Principal Place of Business

Mailing Address

~~18495 SOUTH DIXIE HIGHWAY #179~~
~~MIAMI FL 33157~~

~~18495 SOUTH DIXIE HIGHWAY #179~~
~~MIAMI FL 33157~~

13850 N.W. 26th Avenue
 Miami FL 33054

2. Principal Place of Business

3. Mailing Address

13850 N.W. 26 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Miami FL

City & State

City & State

4. FEI Number

65-1017223

Applied For

Not Applicable

Zip

Country

Zip

Country

33054

DADE

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ESTRADA, LUIS
 18495 SOUTH DIXIE HIGHWAY #179
 MIAMI FL 33157

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 *Luis A. Estrada*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

02/27/01

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
 NAME ESTRADA, LUIS
 STREET ADDRESS 18495 SOUTH DIXIE HIGHWAY #179
 CITY-ST-ZIP MIAMI FL 33157

TITLE ☐ Change ☐ Addition
 NAME *Treasure*
 STREET ADDRESS *Antonio Berrios*
 CITY-ST-ZIP *26825 S.W. 145 St*
Homestead, FL 33032

TITLE D ☐ Delete
 NAME ESTRADA, RUTH
 STREET ADDRESS 11230 SW 181 STREET
 CITY-ST-ZIP MIAMI FL 33157

TITLE ☐ Change ☐ Addition
 NAME *Member Resource Devel. com*
 STREET ADDRESS *Luis Castillo*
 CITY-ST-ZIP *10830 NE. 3 Ave*
Miami, FL

TITLE D ☐ Delete
 NAME BERRIOS, DAVID
 STREET ADDRESS 2318 YORK ST.
 CITY-ST-ZIP HOLLYWOOD FL 33023

TITLE ☐ Change ☐ Addition
 NAME *Member Resource Devel. com*
 STREET ADDRESS *Jairo Corea*
 CITY-ST-ZIP *3035 NW 90 St*
Miami, FL 33147

TITLE D ☐ Delete
 NAME ESTRADA, LUIS
 STREET ADDRESS 18495 SOUTH DIXIE HIGHWAY #179
 CITY-ST-ZIP MIAMI FL 33157

TITLE ☐ Change ☐ Addition
 NAME *Member Housing com.*
 STREET ADDRESS *Juan Ramos*
 CITY-ST-ZIP *77 NE 64 St*
Miami, FL 33138

TITLE ☐ Delete
 NAME *Chairman*
 STREET ADDRESS *Marcos Clemente*
 CITY-ST-ZIP *10300 NW 10 Ave*
Miami, FL 33150

TITLE ☐ Change ☐ Addition
 NAME *Member Housing com.*
 STREET ADDRESS *Carmen Ramos*
 CITY-ST-ZIP *77 NE 64 St*
Miami, FL 33147

TITLE ☐ Delete
 NAME *Vice-Chairman*
 STREET ADDRESS *Gloria Berrios*
 CITY-ST-ZIP *26825 S.W. 145 St*
Homestead, FL 33032

TITLE ☐ Change ☐ Addition
 NAME *Member Executive Com.*
 STREET ADDRESS *Daniel Berrios*
 CITY-ST-ZIP *1235 NW 121 St*
Miami, FL 33032

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Luis A. Estrada
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02/27/01

CR2E037 (10/00)