2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 29, 2007
Secretary of State

DOCUMENT# N00000004300

Entity Name: HELP FOR THE HURTING, INC.

Current Principal Place of Business:

3349 N UNIVERSITY DRIVE
4
DAVIE, FL 33024

New Principal Place of Business:

Current Mailing Address:

POBOX350095
FT LAUDERDALE, FL 33335

New Mailing Address:

FEI Number: 65-1022561 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

AHMAD, MALIK DR.
2000 NORTH 36 AVE
HOLLYWOOD, FL 33021 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: MALIK AHMAD

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	AHMAD, MALIK DR.	
Address:	2000 NORTH 36 AVE	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	D	( ) Delete
Name:	TCHIVIDJIAN, ANGHEL	
Address:	600 N BIRCH ROAD #403	
City-St-Zip:	FORT LAUDERDALE, FL 33304	
Title:	D	(X) Delete
Name:	LA TOUCH, DENISE	
Address:	11781 HATACHER CIRCLE	
City-St-Zip:	ORLANDO, FL 32824	
Title:	D	( ) Delete
Name:	POWELL, PAMELA	
Address:	340 SW 19TH STREET	
City-St-Zip:	FORT LAUDERDALE, FL 333152118	

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:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MALIK AHMAD D 11/29/2007

Electronic Signature of Signing Officer or Director — Date