

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002338

FILED  
Jul 10, 2006  
Secretary of State

Entity Name: HEALTH HELP PROJECT INC.

## Current Principal Place of Business:

807 S.W. 25TH AVENUE  
SUITE 206  
MIAMI, FL 33135

## New Principal Place of Business:

## Current Mailing Address:

807 S.W. 25TH AVENUE  
SUITE 206  
MIAMI, FL 33135

## New Mailing Address:

FEI Number: 65-1092120      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:

PATINO, HENRY REV.  
11865 N. AVIARY DRIVE  
COOPER CITY, FL 33326      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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: PATINO, FRANCISCO J  
Address: 1720 S.W. 32ND CT  
City-St-Zip: MIAMI, FL 33145

Title: VD      ( ) Delete  
Name: PATINO, FRANK DR.  
Address: 49501 PINE RIDGE DR.  
City-St-Zip: PLYMOUTH, MI 48170

Title: TD      ( ) Delete  
Name: PATINO, JOSEPH  
Address: 212 S.W. 179 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ATD      ( ) Delete  
Name: LOPEZ, MANUEL  
Address: 2730 S.W. 33 AVENUE  
City-St-Zip: MIAMI, FL 33133

Title: ED      ( ) Delete  
Name: PATINO, ROBERTO  
Address: 8350 S.W. 27 LANE  
City-St-Zip: MIAMI, FL 33155

Title: SD      ( ) Delete  
Name: PATINO, ISABEL M  
Address: 1720 S.W. 32 COURT  
City-St-Zip: MIAMI, FL 33145

## 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:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCISCO J. PATINO

PD

07/10/2006

Electronic Signature of Signing Officer or Director

Date