2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2007 8:00 am
Secretary of State
02-23-2007 90040 021 ****61.25

DOCUMENT # N01000002338

1. Entity Name

HEALTH HELP PROJECT INC.

Principal Place of Business	Mailing Address
807 S.W. 25TH AVENUE SUITE 206 MIAMI FL 33135	807 S.W. 25TH AVENUE SUITE 206 MIAMI FL 33135

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1720 SW 32CT	1720 SW 32CT
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	#
City & State: MIAMI FLORIDA	City & State: MIAMI FLORIDA
Zip: 33145 Country: USA	Zip: 33145 Country: USA

4. FEI Number: 65-1092120 ☐ Applied For ☐ Not Applicable

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
PATINO, HENRY REV. 11865 N. AVIARY DRIVE COOPER CITY FL 33326	Name 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PATINO, FRANCISCO J 1720 S.W. 32ND CT MIAMI FL 33145	☐ Delete	LOGISTICS DIRECTOR JASON K. PATINO 13974 COVINGTON DR. PLYMOUTH MICHIGAN 48170	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PATINO, FRANK DR. 49501 PINE RIDGE DR. PLYMOUTH MI 48170	☐ Delete	PUBLIC RELATIONS DIR. REV. HENRY PATINO 11865 NO. AVIARY DR. COOPER CITY FL. 33026	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PATINO, JOSEPH 212 S.W. 179 AVENUE PEMBROKE PINES FL 33029	☐ Delete	MIGUEL PATINO 9361 SW 112 ST MIAMI FLORIDA 33176	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATD LOPEZ, MANUEL 2730 S.W. 33 AVENUE MIAMI FL 33133	☐ Delete	I.T DIRECTOR MICHAEL HENRY PATINO 49501 PINE RIDGE DR. PLYMOUTH MI. 48170	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED PATINO, ROBERTO 8350 S.W. 27 LANE MIAMI FL 33155	☐ Delete	ISABEL PENNINGTON 4214 SUGARBERRY LN. HILBURN GA. 30247	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PATINO, ISABEL M 1720 S.W. 32 COURT MIAMI FL 33145	☐ Delete		☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____ FRANCISCO JOSE PATINO 2-13-07 305-4486869
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #