FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000002338 1. Entity Name

HEALTH HELP PROJECT INC.



FILED 03 JUN 24 AM 9 57 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address 807 S.W. 25TH AVENUE 807 S.W. 25TH AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE; 206 SUITE; 206 City & State MIAMI, FL Applied For City & State 4. FEI Number MIAMI, FL Not Applicable Zip Country Country \$8.75 Additional Zip 5. Certificate of Status Desired 33135 33135 US US Fee Required 7. Name and Address of Current Registered Agent **REV. HENRY PATINO** DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 11865 N. AVIARY DRIVE City COOPER CITY The above named entity submits this st the obligations of registered agent. of cleanging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE. Signatu (NOTE. Registered Agent signature required when reinstating January 1 - May 1 Fee is \$1 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 400021379134 TITLE TITLE (PD) FRANCISCO J PATINO NAME NAME 07.708/03--01021--021 **122.50 1720 S.W. 32ND CT STREET ADDRESS STREET ADDRESS MIAMI, FL 33145 ST-ZIP CHY-ST-789 TITLE TITLE (VD) DR. FRANK PATINO NAME NAMÉ 49501 PINE RIDGE DR. STREET ADDRESS STREET ADDRESS PLYMOUTH, MI 48170 CHY-ST-7P CITY-ST-ZIP TITLE TITLE (SD) JOSEPH PATINO NAME NAME 212 S.W. 179 AVENUE STREET ADDRESS STREET ADDRESS DO NOT WRITE PEMBROKE PINES, FL 33029 CITY-ST-ZP CITY-ST-ZIP TITLE TITLE IN THIS SPACE (TD) MANUEL LOPEZ NAME NAME 2730 S.W. 33 AVENUE STREET ADDRESS STREET ADDRESS MIAMI, FL 33133 CITY-ST-ZIP CITY-ST-ZIP: TITLE (D) PAUL RODRIGUEZ NAME MAME 1297 CARTERS FERRY RD. STREET ADDRESS STREET ADDRESS HARTWELL, GA 30643 CITY-ST-ZIP CRY-ST-ZP TITLE TITIF (D) SERGIO CABRERA NAME NAME 9300 HAITIAN DRIVE STREET ADDRESS STREET ADDRESS MIAMI, FL 33189 CITY-ST-7P CITY-ST-7/P 12. It 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

2020 CRZECAB

SIGNATURE:

6/18/03

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HEATOH HETP PROJECTING.

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

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TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR 2002 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

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FRANCISCO J PATINO PRESIDENT