

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006689

FILED
Apr 26, 2006
Secretary of State

Entity Name: HELPING HOMELESS ANIMALS, INC.

Current Principal Place of Business:

7811 SW 88 TERR
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

7811 SW 88 TERR
MIAMI, FL 33156

New Mailing Address:

FEI Number: 06-1695749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLOUCHA, L.M.
ATKINSON, DINER, STONE, MANKUTA & PLOUCHA
1946 TYLER ST
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

WITTELS, S H
7811 S.W 88TH TERRACE
MIAMI, FL 33156 US

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: SHW

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WITTELS, JILL
Address: 7811 SW 88 TERRACE
City-St-Zip: MIAMI, FL 33156

Title: VPD () Delete
Name: WITTELS, EVA
Address: 7811 SW 88 TERRACE
City-St-Zip: MIAMI, FL 33156

Title: VPD () Delete
Name: WITTELS, HARRISON
Address: 7811 SW 88 TERRACE
City-St-Zip: MIAMI, FL 33156

Title: STD () Delete
Name: WITTELS, S HOWARD
Address: 7811 SW 88 TERRACE
City-St-Zip: MIAMI, FL 33156

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 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: JDW

PD

04/26/2006

Electronic Signature of Signing Officer or Director

Date