

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007795

**FILED**  
**Apr 10, 2004**  
**Secretary of State****Entity Name:** EXTENDED HANDS MINISTRIES, INC.**Current Principal Place of Business:**3308 SW 9TH STREET  
19  
MIAMI, FL 33135**New Principal Place of Business:**2180 SW 9TH ST  
MIAMI, FL 33135**Current Mailing Address:**P0 BOX 835842  
HOLLYWOOD, FL 330834641**New Mailing Address:**P.O. BOX 1355  
TAYLORS, SC 29687**FEI Number:** 61-1412254**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BETANCOURT, RICHARD  
251 N. 58TH AVE.  
HOLLYWOOD, FL 33021**Name and Address of New Registered Agent:**VILLASUSSO, ANTONIO  
2180 SW 9TH ST  
MIAMI, FL 29687

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: ANTONIO VILLASUSSO

04/10/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BETANCOURT, RICHARD  
Address: 251 N. 58TH AVE.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: V ( ) Delete  
Name: BETANCOURT, MODESTA  
Address: 251 N. 58TH AVE.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: ST ( ) Delete  
Name: DEL CARMAN CARDONA, MARIA  
Address: 509 N. 61TH AVE.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete  
Name: TORRES, JAVIER  
Address: 2394 POWER DRIVE  
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete  
Name: RIVERA, RICHARD  
Address: 417 GRAND ST # D 1504  
City-St-Zip: NEW YORK, NY 10002

Title: D ( ) Delete  
Name: RIVERA, MARY  
Address: 417 GRAND ST # 21504  
City-St-Zip: NEW YORK, NY 10002

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BETANCOURT, RICHARD  
Address: 55 PINECROFT DR  
City-St-Zip: TAYLORS, SC 29687

Title: V (X) Change ( ) Addition  
Name: BETANCOURT, MODESTA  
Address: 55 PINECROFT DR  
City-St-Zip: TAYLORS, SC 29687

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 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 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: RICHARD BETANCOURT

P

04/10/2004

Electronic Signature of Signing Officer or Director

Date