

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Dec 12, 2006
Secretary of State**

DOCUMENT# N02000008647

Entity Name: HUMAN COMMUNITY SERVICES, INC.

Current Principal Place of Business:175 NW 128 STRET
N.MIAMI, FL 33168**New Principal Place of Business:****Current Mailing Address:**175 N.W 128 STREET
N.MIAMI, FL 33168**New Mailing Address:**

FEI Number: 02-0651459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:DAMAS, HUGO
175 NW 128 STREET
N.MIAMI, FL 33168 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: D () Delete
Name: DAMAS, HUGO
Address: 175 NW 128 STREET
City-St-Zip: N.MIAMI, FL 33168Title: SD () Delete
Name: JOSEPH, FRANCE M
Address: 9645 SW 1CT
City-St-Zip: PEMBROKE PINES, FL 33024Title: TD () Delete
Name: ALCINDOR, JUDE
Address: 19600 NE MIAMI CT
City-St-Zip: MIAMI, FL 33179Title: AD () Delete
Name: LEVEILLE, SUZETTE
Address: 175 NW 128 ST
City-St-Zip: N MIAMI, FL 33168**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: TD (X) Change () Addition
Name: BASTIEN, ADELINE
Address: 1051 NE 140 STREET
City-St-Zip: MIAMI, FL 33161Title: () 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: HUGO DAMAS

D

12/12/2006

Electronic Signature of Signing Officer or Director

Date