

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001178

FILED
Mar 15, 2006
Secretary of State

Entity Name: HAND AND HAND THE BREAD OF LIFE, INC.

Current Principal Place of Business:

1601 W MCNAB RD
POMPANO BEACH, FL 33069

New Principal Place of Business:

1673 W MCNAB RD
POMPANO BEACH, FL 33069

Current Mailing Address:

1601 W MCNAB RD
POMPANO BEACH, FL 33069

New Mailing Address:

1673 W MCNAB RD
POMPANO BEACH, FL 33069

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHANORD, MARICILE
2640 NE 8TH AVE #2
WILTON MANORS, FL 33334 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: PHANORD, MARICILE
Address: 2640 NE 8TH AVE. #2
City-St-Zip: WILTON MANORS, FL 33334

Title: D () Delete
Name: GRAF, CHARLOTTE A
Address: 1081 SW 92 AVE.
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: PHANORD, LOURDE
Address: 2640 NE 8TH AVE. #2
City-St-Zip: WILTON MANORS, FL 33334

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:

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: CHARLOTTE GRAF

D

03/15/2006

Electronic Signature of Signing Officer or Director

Date