2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004216

FILED Apr 12, 2008 Secretary of State

Entity Name: FOUNDATION FOR HUMANITARIAN SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

1504 EAST BEARSS AVE. 2512 LINCOLN STREET. SUITE#2 HOLLYWOOD, FL 33020

LUTZ, FL 33549

Current Mailing Address: New Mailing Address:

1504 EAST BEARSS AVE. P O BOX 5577

SUITE#2 HOLLYWOOD, FL 33020 LUTZ, FL 33549

FEI Number: 52-2392796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCCEUS, MIREILLE P LUCCEUS, MIREILLE P 3701 CARROLLWOOD PLACE CIRCLE 2512 LINCÓLN STREET US

HOLLYWOOD, FL 33020 APT. 104 TAMPA, FL 33624 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: MIRILLE LUCCEUS 04/12/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

TAMPA, FL 33624 US

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

LUCCEUS, MIREILLE P LUCCEUS, MIREILLE P Name: Name: 3701 CARROLLWOOD PLACE CIRCLE Address: 2512 LINCOLN STREET Address:

City-St-Zip: TAMPA, FL 33624 City-St-Zip: HOLLYWOOD, FL 33020 US

Title: () Delete Title: (X) Change () Addition MATHURIN, MARLENE Name: DURAND, CHARLES R Name:

Address: 59-30 108TH STREET Address: 3701 PRESERVE CT APT 207 City-St-Zip: FORREST HILLS, NY 11368 City-St-Zip: TAMPA, FL 33624 US

Title: () Delete Title: D,S (X) Change () Addition TOUSSAINT, VLADIMR PIERRE, KEDNA Name: Name:

412 MAGESTIC TERRANCE Address: City-St-Zip: PORT SAINT LUCY, FL 34983 US City-St-Zip: NORTH MIAMI BEACH, FL 333162 US

Address:

City-St-Zip:

1970 NE 181 ST

Title: (X) Delete Title: () Change () Addition

BANATTE, ROLDINE Name: Name: Address: 824 RIXEY STREET EAST Address: City-St-Zip: LEHIGH ACRES, FL 33936 US City-St-Zip:

Title: (X) Delete Title: () Change () Addition

DORCILIEN, BELIDANIA Name: Name: 3803 PRESERVE COURT APT # 207 Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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: MIRIELLE LUCCEUS **PRES** 04/12/2008

Electronic Signature of Signing Officer or Director

Date