

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 02, 2007
Secretary of State**

DOCUMENT# N03000004973

Entity Name: HANDS ON TZEDAKAH, INC.

Current Principal Place of Business:

2255 GLADES RD.
SUITE 324A, PMB 1114
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2255 GLADES RD., SUITE 324A, PMB 1114
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 86-1067535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ROSE B
2255 GLADES RD., SUITE 324A, PMB 1114
BOCA RATON, FL 33431 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: ROBINSON, ROSE B
Address: 20815 PINAR TRAIL
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: GALLATIN, RONALD L
Address: 17061 BROOKWOOD DR.
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: GLICKMAN, MARK
Address: 21080 SHADY VISTA LANE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: ROBINSON, ROSE B
Address: 20815 PINAR TRAIL
City-St-Zip: BOCA RATON, FL 33433

Title: O (X) Change () Addition
Name: GALLATIN, RONALD L
Address: 17061 BROOKWOOD DR.
City-St-Zip: BOCA RATON, FL 33496

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: ROSE ROBINSON

O

02/02/2007

Electronic Signature of Signing Officer or Director

_____ Date