

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009542

FILED
Jan 05, 2009
Secretary of State

Entity Name: HELPINGYOUHELP, INC.

Current Principal Place of Business:

6121 SW 42ND COURT
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

6121 SW 42ND COURT
DAVIE, FL 33314

New Mailing Address:

FEI Number: 20-1750032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHARP, CHRISTOPHER C ESQ
7350 NW 5TH ST.
PLANTATION, FL 33317 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: E.D. () Delete
Name: PIERCE, KAROL S
Address: 6121 SW 42ND CT
City-St-Zip: DAVIE, FL 33314

Title: L.D. () Delete
Name: SHARP, CHRISTOPHER C ESQ
Address: 7350 NW 5TH ST
City-St-Zip: PLANTATION, FL 33317

Title: PR.D () Delete
Name: DOMBROSKI, PAUL A
Address: 6121 SW 42ND CT
City-St-Zip: DAVIE, FL 33314

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 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: KAROL S. PIERCE

E.D.

01/05/2009

Electronic Signature of Signing Officer or Director

Date