

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009851

FILED
Apr 14, 2006
Secretary of State

Entity Name: H/H NEW DIRECTIONS INC.

Current Principal Place of Business:

2527 OPA LOCKA BLVD.
OPA LOCKA, FL 33054

New Principal Place of Business:

17761 S.W. 177TH TERR
MIAMI, FL 33177

Current Mailing Address:

2527 OPA LOCKA BLVD.
OPA LOCKA, FL 33054

New Mailing Address:

17761 S.W. 177TH TERR.
MIAMI, FL 33177

FEI Number: 20-1787973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MINCEY, JUANITA
2527 OPA LOCKA BLVD.
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

MINCEY, JUANITA
12868 S. W. 177TH TERR
MIAMI, FL 33177 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:

04/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLLINS, PATRICK E
Address: 11761 SW 17TH TERR.
City-St-Zip: MIAMI, FL 33177

Title: V () Delete
Name: LECLAIR, CHARLES E
Address: 445 NW 4TH ST, #1209
City-St-Zip: MIAMI, FL 33128

Title: SD () Delete
Name: LOPEZ, SHARON
Address: 1830 NE 175TH ST
City-St-Zip: N MIAMI, FL 33162

Title: TD (X) Delete
Name: SULLIVAN, TERENCE
Address: 520 SW 161 AVE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D (X) Delete
Name: TAMAYO, GEORGE
Address: 19101 SW 123 AVE
City-St-Zip: MIAMI, FL 33177

Title: D (X) Delete
Name: BERMUDEZ, ALBERTO P
Address: 935 79TH TERRACE, APT #2
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: ABELIN, MARIE
Address: 17761 S.W.177TH TERR
City-St-Zip: MIAMI, FL 33177

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: PATRICK COLLINS

PRES

04/14/2006

Electronic Signature of Signing Officer or Director

Date