2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2008
Secretary of State

DOCUMENT# N05000001209

Entity Name: MAHA HELPING HANDS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

6289 W. SUNRISE BLVD
123
SUNRISE, FL 33313

New Principal Place of Business:

11336 WILES ROAD
3
CORAL SPRINGS, FL 33071

Current Mailing Address:

6289 W. SUNRISE BLVD
123
SUNRISE, FL 33313

New Mailing Address:

11336 WILES ROAD
3
CORAL SPRINGS, FL 33071

FEI Number: 04-3815411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MAHARAJH, AVANTI
6289 W. SUNRISE BLVD
123
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

MAHARAJH, AVANTI
11336 WILES ROAD
3
CORAL SPRINGS, FL 33071 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: AVANTI MAHARAJH 07/08/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MAHARAJH, AVANTI P
Address: 6289 W. SUNRISE BLVD, STE 123
City-St-Zip: SUNRISE, FL 33313

Title: VPD ( ) Delete
Name: SOOKDEO, ARTHUR
Address: 6289 W. SUNRISE BLVD, STE. 123
City-St-Zip: SUNRISE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MAHARAJH, AVANTI P
Address: 11336 WILES ROAD
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VPD (X) Change ( ) Addition
Name: SOOKDEO, ARTHUR
Address: 11336 WILES ROAD
City-St-Zip: CORAL SPRINGS, FL 33071

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: AVANTI MAHARAJH P 07/08/2008
Electronic Signature of Signing Officer or Director Date