

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001255

FILED  
May 02, 2008  
Secretary of State

**Entity Name:** A HELPING HAND FOR THE COMMUNITY, INC.

**Current Principal Place of Business:**

5803 SW 8 ST  
MIAMI, FL 33144

**New Principal Place of Business:**

5995 SW 8 ST  
MIAMI, FL 33144

**Current Mailing Address:**

5355 WEST 6TH AVE  
HIALEAH, FL 33012

**New Mailing Address:**

FEI Number: 43-2096881      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:**

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

VILA, KEILA  
5355 WEST 6 TH AVE  
HIALEAH, FL 33012      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: VILA, KEILA  
Address: 5355 WEST 6TH AVE  
City-St-Zip: HIALEAH, FL 33012

Title: VP ( ) Delete  
Name: ROIG, JUAN A  
Address: 5355 WEST 6TH AVE  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: KEILA VILA

P

05/02/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date