2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2009
Secretary of State

DOCUMENT# N06000001907

Entity Name: HANDS FOR JESUS PUPPET MINISTRY, INC.

Current Principal Place of Business:

17505 N.W. 7TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

17505 N.W. 7TH STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 45-0550765 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, ANGEL L
2801 BOGOTA AVENUE
HOLLYWOOD, FL 33026 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: PD ( ) Delete
Name: MILLARES, PABLO
Address: 17505 N.W. 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VD ( ) Delete
Name: MILLARES, ALINA
Address: 17505 N.W. 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VTD ( ) Delete
Name: MAJANO, NELLY
Address: 11560 S.W. 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: SD ( ) Delete
Name: GONZALEZ, ANGEL L
Address: 2801 BOGOTA AVENUE
City-St-Zip: HOLLYWOOD, FL 33026

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:

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: NELLY MAJANO VTD 02/15/2009

Electronic Signature of Signing Officer or Director — Date