2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007311

FILED May 03, 2007 Secretary of State

	me: US FAMILY HELP, INC.		Secretary of State	
Current P	rincipal Place of Business:	New Principal Place of	Business:	
	RIS AVENUE 'A, FL 34233			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
	RIS AVENUE 'A, FL 34233			
FEI Number: 20-5161167 FEI Number Applied For () FEI Nur In accordance with s. 607.193(2)(b), F.S., the corporation did not receive to			Certificate of Status Desired ()	
Name and	Address of Current Registered Age	nt: Name and Address of N	lew Registered Agent:	
FERNANDEZ & GARCIA, P.A. 4023 N ARMENIA AVE SUITE 400		THOMPSON, VERONIC≠ 4775 HARRIS AVE	THOMPSON, VERONICA A 4775 HARRIS AVE	
TAMPA, FL 33607 US		SARASOTA, FL 34233	SARASOTA, FL 34233 US	
	named entity submits this statement fo e of Florida.	r the purpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE: VERONICA THOMPSON			05/03/2007	
	Electronic Signature of Registere	ed Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	D () Delete	· , ,	Change () Addition	
Name: Address:	THOMPSON, VERONICA 4775 HARRIS AVENUE	Name: Address:		
City-St-Zip:	SARASOTA, FL 34233	City-St-Zip:		
Title:	D () Delete		Change () Addition	
Name: Address:	TELLEZ, CAMILA 4775 HARRIS AVENUE	Name: Address:		
City-St-Zip:	SARASOTA, FL 34233	City-St-Zip:		
Title:	D () Delete		Change () Addition	
Name: Address:	MARTINEZ, ZAIDA 4775 HARRIS AVENUE	Name: Address:		
City-St-Zip:	SARASOTA, FL 34233	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: VERONICA THOMPSON D 05/03/2007