2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# N07000006691

Entity Name: HELP FOR CHILDREN & FAMILY'S IN NEED, INC.

Current Principal Place of Business:

770 NE 86TH STREET
MIAMI, FL 331383626

New Principal Place of Business:

Current Mailing Address:

770 NE 86TH STREET
MIAMI, FL 331383626

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

FRAGELUS, GASTON
770 NE 86TH STREET
MIAMI, FL 331383626 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: GASTON FRAGELUS
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CP ( ) Delete
Name: FRAGELUS, GASTSON
Address: 770 NE 86TH STREET
City-St-Zip: MIAMI, FL 331383626

Title: DV ( ) Delete
Name: FRAGELUS, MERLANDE
Address: 770 NE 86TH STREET
City-St-Zip: MIAMI, FL 331383626

Title: DV ( ) Delete
Name: ST CHARLES, STEPHAN
Address: 770 NE 86TH STREET
City-St-Zip: MIAMI, FL 331383626

Title: DS ( ) Delete
Name: RIENIEL, MAY
Address: 770 NE 86TH STREET
City-St-Zip: MIAMI, FL 331383626

Title: DT ( ) Delete
Name: FRAGELUS, SOIHNEUSE
Address: 770 NE 86TH STREET
City-St-Zip: MIAMI, FL 331383626

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:

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: MERLANDE FRAGELUS DV 01/23/2009
Electronic Signature of Signing Officer or Director — Date