

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009495

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** THE HIP HOP AND HEALTH FOUNDATION, INC.

**Current Principal Place of Business:**

2440 STATE ROAD 580  
#8  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

2440 STATE ROAD 580  
#8  
CLEARWATER, FL 33761

**New Mailing Address:**

**FEI Number:** 26-1135810

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAMIANAKIS, NICK  
1518 SWEETSPIRE DRIVE  
TRINITY, FL 34655 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: D  
Name: DAMIANAKIS, NICK  
Address: 1518 SWEETSPIRE DRIVE  
City-St-Zip: TRINITY, FL 34655

Title: D  
Name: DAMIANAKIS, LISA  
Address: 1518 SWEETSPIRE DRIVE  
City-St-Zip: TRINITY, FL 34655

I hereby 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 all other like empowered.

SIGNATURE: NIKITAS DAMIANAKIS

D

01/07/2010

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

\_\_\_\_\_  
Date