

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010575

**FILED**  
**Feb 19, 2010**  
**Secretary of State**

**Entity Name:** TABERNACLE OF PRAISE AND WORSHIP HELPING HANDS MINISTRIES, INTERNATIONAL TOPAW:  
ANGLES ON A MISSION, INC.

**Current Principal Place of Business:**

600 SW 3 ST  
2290  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1065  
BOCA RATON, FL 33429

**New Mailing Address:**

**FEI Number:** 26-1419962      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GUASTELLA, CONJAILA  
10785 MADISON DRIVE  
BOYNTON BEACH, FL 33437      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:** P  
**Name:** GUASTELLA, CONJAILA  
**Address:** POST OFFICE BOX 1065  
**City-St-Zip:** BOCA RATON, FL 33429

**Title:** S  
**Name:** FORBES, CHRISTINE  
**Address:** 2201 BAHAMA DRIVE  
**City-St-Zip:** MIRAMAR, FL 33414

**Title:** T  
**Name:** WILLIAMS, GRACE A  
**Address:** 21 WESTMINSTER STREET  
**City-St-Zip:** HARTFORD, CT 06112

**Title:** V  
**Name:** PALMER, GEORGIA  
**Address:** 2028 SHOMA DRIVE  
**City-St-Zip:** ROYAL PALM, FL 33414

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: CONJAILA GUASTELLA

PRES

02/19/2010

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

\_\_\_\_\_  
Date