

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 01, 2010
Secretary of State

DOCUMENT# N08000007923

Entity Name: HESED KIDS CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**670 EAST 9 LANE
HIALEAH, FL 33010**New Principal Place of Business:****Current Mailing Address:**670 EAST 9 LANE
HIALEAH, FL 33010**New Mailing Address:****FEI Number:** 26-3240170**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ESPINAL, OSELIA Y
1500 SAN REMO AVENUE SUITE 125
CORAL GABLES, FL 33146 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:** PTD
Name: MUNOZ, ROXANA
Address: 670 EAST 9 LANE
City-St-Zip: HIALEAH, FL 33010**Title:** ASTD
Name: POL, MILDRED
Address: 7896 SW 12 STREET
City-St-Zip: MIAMI, FL 33144**Title:** SD
Name: FERNANDEZ, OLGA
Address: 6370 SW 19 TERRACE
City-St-Zip: MIAMI, FL 33155**Title:** VPD
Name: COLLADO, ONEIDA
Address: 1307 NW 31 AVE
City-St-Zip: MIAMI, FL 33125**Title:** AVPD
Name: PEREZ, LUCY V
Address: 12240 SW 186 STREET
City-St-Zip: MIAMI, FL 33177**Title:** ASD
Name: CAREAGA, MARTICA
Address: 11319 SW 76TH STREET
City-St-Zip: MIAMI, FL 33173

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: ROXANA MUNOZ

PTD

02/01/2010

Electronic Signature of Signing Officer or Director

Date