

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005108

FILED
Jan 31, 2011
Secretary of State

Entity Name: CARE RELIEF INC.

Current Principal Place of Business:

3389 SHERIDAN STREET
277
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3389 SHERIDAN STREET
277
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 27-0545099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODMAN, MERRILL D JR.
3389 SHERIDAN STREET
277
HOLLYWOOD, FL 33021 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: RODMAN, MERRILL D JR.
Address: 3389 SHERIDAN STREET #277
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP
Name: GOODMAN, CHARISMA
Address: 3389 SHERIDAN STREET #277
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP
Name: VARGA, ZOLTAN
Address: 3389 SHERIDAN STREET #277
City-St-Zip: HOLLYWOOD, FL 33021

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: MERRILL D. RODMAN JR

PRES

01/31/2011

Electronic Signature of Signing Officer or Director

Date