

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

DOCUMENT# N09000007296

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** HELPING HANDS FOR THE HOMELESS, INC.

**Current Principal Place of Business:**

11105 SW 127TH COURT  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

11105 SW 127TH COURT  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ABERCROMBIE ACCOUNTING, INC.  
16115 SW 117TH AVENUE SUITE 25  
MIAMI, FL 33177 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: DP  
Name: BROOKS, WILLIE  
Address: 11105 SW 127TH COURT  
City-St-Zip: MIAMI, FL 33186

Title: D  
Name: WOODS, ISAAC  
Address: 1205 NW 203RD STREET  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D  
Name: ABERCROMBIE, WRAY  
Address: 16115 SW 117TH AVENUE #25  
City-St-Zip: MIAMI, FL 33177

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:** WILLIE BROOKS

DP

04/28/2010

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

\_\_\_\_\_  
Date