NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 29, 2005 8:00 am Secretary of State

People helping People outreach Changli sur Ministries/Mitoro			1	29-2005 90241 033 ****61.25	
DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address				14008868	
8101 NW 22 4V 235C1 Suite, Apt. #, etc. Suite, Apt. #		5457	DO NOT WRITE IN THIS SPACE		
City & State MiAMI F/	City & State	FI	4. FEI Number	75853 Applied For Not Applicable	
33/47 Miami Da	Je 33142	Country DANO USA	5. Certificate of St	Fee Required	
DO NOT WRITE IN THIS SPACE		Street Address	Street Address (PO. Box Number is Not Acceptable) 2350 1V. W 545+ 4ni+ 705 City 20		
8. 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. I am familiar with, and accept the obligations of registered agent,					
FEE IS \$61.25 9. Election Campa Initial or Amended UBR Trust Fund Cont		Registered Agent signature require	d when reinstating)	DATE	
			\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State	
Initial or Amended UBR 10. OFFICERS AND TITLE PTESIDENT! NAME AWDRE FRANCE STREET ADDRESS CITY-ST-ZIP M. AMI F1 33 II THLE ASIT PRESIDENT NAME The MAN B France STREET ADDRESS CITY-ST-ZIP N. MINIMAN BEFICE	Trust Fund Co		\$5.00 May Be		
Initial or Amended UBR 10. OFFICERS AND IIILE President NAME AWDRE France STREET ADDRESS 2350 N.W 54st M.AMI Fl 331 IIILE Asit President NAME STREET ADDRESS 271 NE 120 St	Trust Fund Co DIRECTORS Unit 705 42 #117 F1 33160 AN Ext #1-204	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Florida Department of State	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

hold France

4-24.05

305:634-7452