2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002853

FILED Feb 11, 2008 Secretary of State

Entity Name: PEOPLE HELPING PEOPLE OUTREACH EVANGLISM MINISTRIES/MISSION INC.

Current Principal Place of Business: New Principal Place of Business: 8101 N.W. 22 AVE. MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** 12300 NORTH EAST 4TH AVE **UNIT 315** NORTH MIAMI, FL 33161 FEI Number: 65-0758531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANCE, ANDRE R 12300 NORTH EAST 4TH AVE **UNIT 315** NORTH MIAMI, FL 33161 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FRANCE, ANDRE R Name: Name: 12300 NORTH EAST 4TH AVE Address: Address: City-St-Zip: NORTH MIAMI, FL 33161 City-St-Zip: Title: VD () Delete Title: () Change () Addition FRANCE, THELMA E Name: Name: Address: 2201 NORTH EAST 170ST, APT.117 Address: City-St-Zip: N. MIAMI BEACH, FL 33160 City-St-Zip: Title: () Delete Title: () Change () Addition COPELANE, CATHERINE Name: Name: 1727 NW 50 STREET Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: Title: () Delete Title: () Change () Addition BENTLEY, MARRY Name: Name: 301 NW 22 STREET, #204 Address: Address: City-St-Zip: MIAMI, FL 33127 City-St-Zip: Title: () Delete Title: () Change () Addition HARRIS, REGGIE Name: Name: 2525 NW 66 STREET Address: Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip: Title: () Delete Title: () Change () Addition HUNT, ROBERT Name: Name: Address: 2350 NW 54 STREET, UNIT 611 Address: MIAMI, FL 33142 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDRE FRANCE MR 02/11/2008