AS 1

SECOND NOTICE. CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998/99

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR 15 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

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DOCUMENT # N97000003358 (5)

1. Corporation Name

WE CARE "HELP" MINISTRY, INC.

Principal Place of Business	Mailing Address
11900 NW 31ST PLACE SUNRISE FL 33323	11900 NW 31ST PLACE SUNRISE FL 33323

3. Date Incorporated or Qualified: 06/10/1997

4. FEI Number: 59-3452352 ☐ Applied For ☐ Not Applicable

21	2. Principal Place of Business: 11900 NW. 31 PL	26	2a. Mailing Address: SAME
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
	City & State: SUNRISE FL.	28	City & State: SAME
24	Zip: 33323	29	Zip:
25	Country: Broward	30	Country:

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FRANCO, GERALDINE
11900 NW 31ST PLACE
SUNRISE FL 33323

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P.D President Geraldine Franco 11900 NW. 31St PL Sunrise FL 33323	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VOID Vice President Peggie Brodk Grant 5202 NW. 22 St Apt 1 Lauderhill FL 33313	☐ DELETE	2.1 TITLE VPD 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP Vice President Peggie Brodk Grant 5202 NW. 22 St Apt 1 LAuderhill FL 33313	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Dana Sheffield 1700 S.W. 69 Ave Plantation FL 33317	☒ DELETE	3.1 TITLE ST 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP Ethel Morrison 1341 N.W. 51 Ave LAuderhill FL 33313 Secertary	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secr Gail Sheffield 1700 S.W. 69 Ave Sec Plantation FL 333	☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 400002819[illegible] -03/26/99--01004--003 ****122.50 ****122.50	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☒ Addition

CR2E037 (5/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Geraldine Franco Geraldine Franco 1/28/99 (954)485-3585

-Please do not remove-

2-26-99

To whom it May Concern
I Geraldine Franco would like to apologize for the fact that you have not received proper paper and funds. I had talk with someone for your office a while back. Concerning this ministry we went through some problems Concerning our Vice president and his wife. They withheld our paper work and also other thing. They no longer is a part of this ministry I sent in a check also original paper with the change on January 25, but for some reason I found out that you never received them. upon speaking to you all on 2-24-99 I was asked to send in my copy of State and a check for Reinstatement also Annual fees. Inclose, you will give all of the above. Thank you for your patient and have a Blessed Day

God Bless
Geraldine Franco
President