

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 26, 2002 8:00 am
Secretary of State

08-26-2002 90052 024 ****61.25

DOCUMENT # N98000006470

1. Entity Name

TO HELP INC.

Principal Place of Business

**2312 N.W. 30TH CT., STE. A
 FT. LAUDERDALE FL 33311-1416**

Mailing Address

**P.O. BOX 39612
 FT. LAUDERDALE FL 33339-9612
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0876438

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SAVAGE, BOB

***124 NE 19 CT, B-219**

FT. LAUDERDALE FL 33305-1064

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DPT** ☐ Delete
 NAME **SAVAGE, BOB**
 STREET ADDRESS **2312 N.W. 30TH CT., STE. A**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311-1416**

TITLE **DPT** ☒ Change ☐ Addition
 NAME **SAVAGE, BOB**
 STREET ADDRESS **124 NE 19 CT B-219**
 CITY-ST-ZIP **FT. LAUDERDALE, FL 33305**

TITLE **DVP** ☐ Delete
 NAME **BOZARTH, EDWARD**
 STREET ADDRESS **2312 N.W. 30TH CT., STE. A**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311-1416**

TITLE **DVP** ☒ Change ☐ Addition
 NAME **BOZARTH, EDWARD**
 STREET ADDRESS **124 NE 19 CT B-219**
 CITY-ST-ZIP **FT. LAUDERDALE, FL. 33305**

TITLE **DS** ☐ Delete
 NAME **BLACK, DENISE M**
 STREET ADDRESS **2312 N.W. 30TH CT., STE. A**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33311-1416**

TITLE **DS** ☒ Change ☐ Addition
 NAME **BLACK, DENISE M.**
 STREET ADDRESS **124 NE 19 CT - B-219**
 CITY-ST-ZIP **FT. LAUDERDALE, FL. 33305**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02
 Date

Daytime Phone #

CR2E037 (9/01)