

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006704

FILED
Apr 30, 2004
Secretary of State

Entity Name: H H H (HUNTERS HELPING HANDS), INC.

Current Principal Place of Business:

3034 N.W. 57TH STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

480 N.W. 39TH AVE.
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0961347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, JOSEPH
3034 N.W. 57TH STREET
MIAMI, FL 33145 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: PD () Delete
Name: HUNTER, JOSEPH
Address: 480 N.W. 39TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: VP () Delete
Name: HUNTER, CYNTHIA
Address: 480 N.W. 39TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D () Delete
Name: SAVAGE, DOROTHY
Address: 2961 N W 24TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: M () Delete
Name: LAW, BEULAH
Address: 555 NE 123RD STREET, APT 212
City-St-Zip: N MIAMI BEACH, FL 33161

Title: T () Delete
Name: HARRIS, MICHAEL
Address: 6740 NW 175TH LANE APT I
City-St-Zip: MIAMI LAKES, FL 33015

Title: M () Delete
Name: MCFADDEN, KATHY
Address: 824 NW 75TH STREET
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CANDIDA L. GARVIN

S

04/30/2004

Electronic Signature of Signing Officer or Director

Date

CANDIDA L. GARVIN
6660 LANDINGS DR.
#113
LAUDERHILL, FL 33319