2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000157816

Entity Name: HELPING HANDS HOME CARE SERVICE, INC.

FILED Jan 05, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1032 BENTLEY STREET 6103 CENTENNIAL DRIVE ORLANDO, FL 32805 ORLANDO, FL 32808

Current Mailing Address: New Mailing Address:

1032 BENTLEY STREET 6103 CENTENNIAL DRIVE ORLANDO, FL 32805 ORLANDO, FL 32808

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIERCE, IDA M OWNER PIERCE, IDA M OWNER 1032 BENTLEY STREET 6103 CENTENNIAL ORLANDO, FL 32805 ORLANDO, FL 32808 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: 01/05/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete Title:

Title: PIERCE, IDA M Name: Name: PIERCE, IDA M

1732 MERCY DRIVE 8 Address: 6103 CENTENNIAL DRIVE Address: City-St-Zip: ORLANDO, FL 32808 US City-St-Zip: ORLANDO, FL 32808 US

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IDA PIERCE P/D 01/05/2007