2006 FOR PROFIT CORPORATION REINSTATEMENT

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REINSTATEMENT						-	FI	EU	I a r i		
DOCUMENT # P04000171833 1. Entity Name							SECRETAR DIVISION OF (ຼືຕູ່ສະຕິດເ	'ATIORS		
ASK HEL	.PING HANDS, INC.					06 MAR 28	AH 8	8: 58			
Principal Place of Business Mailing Address 101 SANDPIPER AVENUE 101 SANDPIPER AVENUE						-					
1	M BEACH, FL 33411	101 SANDPIPER AVENUE ROYAL PALM BEACH, FL 33411				rems	TATER		05	-06	
2. Principal F	3. Mailing Address 130A Sparr	Mailing Address L30A Sparrow Drive									
Suite, Apt.		Suite, Apt. #, etc.				03142006	REIN-P	CR2E	(11/05)		
	1 Palm Beach, FL	City & State Royal Palm			FL	4- FEI Numbe	61639	10		oplied For ot Applicable	
33411	Country US _6. Name and Address of Current R	33411	Cour	•		1	of Status Desired	X	\$8.75 Ad Fee Require		
						/. Name and	Address of New F	legistered	Agent.		
GREENE, VICTORIA 10TSANDPIPER AVENUE ROYAL PALM BEACH, FL 33411					Street Address (P.O. Box Number is Not Acceptable) 130A Sparrow Drive						
				City	_			F	Zip Coo	le .	
8. The above	named entity submits this statement for tions of reastered agent.	the purpose of changing its	register	L_ed office o	register	ed agent, or bot	h, in the State of Flo		- 1	and accept	
SIGNATURE	Vietoria B	reene						3	122	26	
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable (NOTE	i. Register	ed Agent sign.	ture requir	red when reinstating)		DATE	123/		
FILE NOW!!! FEE IS \$300.00							In accordance v corporation did	vith s. 60 not recei	7.193(2)(b), ve the prior	F.S., the notice.	
10.	OFFICERS AND D		11.			ADDITIONS/	CHANGES TO OFF	ICERS AN	D DIRECTOR	S IN 11	
TITLE NAME	P GREENE, VICTORIA	☐ Delete	. TITLE NAM		P GRI	EENE. V	ICTORIA		K Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	101 SANDPIPER AVENUE ROYAL PALM BEACH, FL 33411			et address -st-zip	130/	A SPÁRR	OW DRIVE				
TITLE NAME	ST GREENE, VICTORIA	☐ Delete	TITLE		ST	YAL PAL	M BEACH,	-FL	33411 K Change	Addition	
STREET ADDRESS	101 SANDPIPER AVENUE ROYAL PALM BEACH, FL 33411		STRE	et address -st-zip			ICTORIA ROW DRIV	T.			
TITLE	TOTAL TALIFICATION TO STATE	☐ Delete	TITLE				M BEACH,		3 B 4c4 1	Addition	
NAME STREET ADDRESS CITY-ST-ZIP				e et address -st-zip						I	
TITLE NAME		☐ Delete	TITLE			.	~a z~~a ~~~a ~~		Change	Addition	
STREET ADDRESS CITY-ST-ZIP			STRE	ET ADDRESS -ST-ZIP		04/06	/0601051 	023	r r≒. ' **308 -	. 75	
TITLE NAME		☐ Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				et address -st-zip							
TITLE NAME		☐ Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				et address - St-Zip							
12. I hereby o	certify that the information supplied with to on this report or supplemental report is to	this filing does not qualify for	the exe	emptions c	ontained	in Chapter 119	Florida Statutes. I	further ce	rtify that the in	nformation or director	
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 repetiver or trustee empowered to execute this report as required by Chapter 607, 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: Yictarin Green 3/43/06											
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VICTORIa Greene, Pres Daytime Phone											