2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066320

City-St-Zip:

HOMESTEAD, FL 33030

Entity Name: HELPING HANDS HOME HEALTH CORP

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
			New Fillicipal Flace C		
2301 NW 3 MIAMI, FL	7TH STREET \$ 33125	BUITE C			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2301 NW I MIAMI, FL	7TH STREET S 33125	SUITE C			
FEI Number:	: 33-1167799	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and Address of	d Address of New Registered Agent:	
824 E MO\), CARLOS WRY DR 1208 EAD, FL 33030	US			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	DP () CASTILLO, CAI 824 E MOWRY		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CARLOS CASTILLO P 04/24/2008