2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 01, 2008
Secretary of State

DOCUMENT# P07000066320

Entity Name: HELPING HANDS HOME HEALTH CORP

Current Principal Place of Business:

2301 NW 7TH STREET SUITE C
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

2301 NW 7TH STREET SUITE C
MIAMI, FL 33125

New Mailing Address:

FEI Number: 33-1167799 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASTILLO, CARLOS
824 E MOWRY DR 1208
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

CASTILLO, PASTOR
2301 NW 7TH STREET
MIAMI, FL 33125 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: PASTOR CASTILLO 10/01/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CASTILLO, CARLOS
Address: 824 E MOWRY DR 1208
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CASTILLO, PASTOR
Address: 2301 NW 7TH STREER SUITE C
City-St-Zip: MIAMI, FL 33125 US

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: PASTOR CASTILLO P 10/01/2008
Electronic Signature of Signing Officer or Director Date