

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000046614

FILED
Apr 07, 2010
Secretary of State

Entity Name: HELPING HANDS HEALTHCARE, INC.

Current Principal Place of Business:

2999 N.E. 191 STREET
PH 2
AVENTURA, FL 33019

New Principal Place of Business:

2799 SW 32ND AVE
PEMBROKE PARK, FL 33023

Current Mailing Address:

2999 N.E. 191 STREET
PH 2
AVENTURA, FL 33019

New Mailing Address:

2799 SW 32ND AVE
PEMBROKE PARK, FL 33023

FEI Number: 26-2589698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, STEVE Z
2320 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: TOLEDANO, YIZHAK
Address: 3624 ESTATE OAK CIRCLE
City-St-Zip: HOLLYWOOD, FL 33312

Title: VP
Name: LEVY, STEVE E
Address: 5130 N HILLS DR
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP
Name: SUSMAN, GAVIN
Address: 3773 OAK RIDGE LANE
City-St-Zip: WESTON, FL 33331

I hereby 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 all other like empowered.

SIGNATURE: STEVE LEVY

MANA

04/07/2010

Electronic Signature of Signing Officer or Director

Date