

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000073180

Entity Name: HELP SOMEONE HEAL THROUGH LAUGHTER, INC.

Current Principal Place of Business:

11830 SHIRE WYCLIFFE COURT
TAMPA, FL 33626

Current Mailing Address:

11830 SHIRE WYCLIFFE COURT
TAMPA, FL 33626

FEI Number: 46-3584291

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OWENS, DAVIES
11830 SHIRE WYCLIFFE COURT
TAMPA, FL 33626 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: DAVIES OWENS

04/12/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name OWENS, DAVIES
Address 11830 SHIRE WYCLIFFE COURT
City-State-Zip: TAMPA FL 33626

Title ST
Name OWENS, NANCY
Address 11830 SHIRE WYCLIFFE COURT
City-State-Zip: TAMPA FL 33626

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: DAVIES OWENS

PRESIDENT

04/12/2014

Electronic Signature of Signing Officer/Director Detail

Date