

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005376

FILED
Jan 04, 2005
Secretary of State

Entity Name: HEARTBEAT INTERNATIONAL WORLDWIDE, INC.

Current Principal Place of Business:

6800 NORTH DALE MABRY
#186
TAMPA, FL 33614 US

New Principal Place of Business:

6800 NORTH DALE MABRY
#124
TAMPA, FL 33614 US

Current Mailing Address:

6800 NORTH DALE MABRY
#186
TAMPA, FL 33614 US

New Mailing Address:

6800 NORTH DALE MABRY
#124
TAMPA, FL 33614 US

FEI Number: 59-3236060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MICK, WIL
6800 NORTH DALE MABRY
SUITE 186
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

MICK, WIL
6800 NORTH DALE MABRY
SUITE 124
TAMPA, FL 33614 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: WIL MICK

01/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCINTOSH, HENRY D
Address: 6800 N. DALE MABRY #186
City-St-Zip: TAMPA, FL 33614

Title: C () Delete
Name: MANISCALCO, BENEDICT S MD
Address: 4730 N. HABANA AVNUE, SUITE 201
City-St-Zip: TAMPA, FL 33614

Title: T () Delete
Name: LORTON, GEORGE H
Address: 1616 PENNY STREET
City-St-Zip: TAMPA, FL 33605

Title: P () Delete
Name: MICK, WIL
Address: 6800 N. DALE MABRY, #186
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCINTOSH, HENRY D
Address: P. O. BOX 1788
City-St-Zip: LAKE LAND, FL 33802

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: MICK, WIL
Address: 6800 N. DALE MABRY, #124
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WIL MICK

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date