

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000308

FILED
Mar 22, 2013
Secretary of State
CC3169356066

Entity Name: THE HEALING PROJECT, INC.

Current Principal Place of Business:

7430 NW 1ST CT
PEMBROKE PINES, FL 33024

Current Mailing Address:

7430 NW 1ST CT
PEMBROKE PINES, FL 33024

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAHAM, ANNE-MONIQUE
7430 NW 1ST CT
PEMBROKE PINES, FL 33024 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ABRAHAM, ANNE-MONIQUE
Address 7430 NW 1ST CT
City-State-Zip: PEMBROKE PINES FL 33024

Title V
Name ABRAHAM, PAUL
Address 7430 NW 1ST CT
City-State-Zip: PEMBROKE PINES FL 33024

Title S
Name ADE, MARILINE
Address 3608 SW 70 AVE
City-State-Zip: MIRAMAR FL 33023

Title T
Name ZAMOR, MICHELLE
Address 8540 N SHERMAN CIR. APT 203
City-State-Zip: MIAMI FL 33025

Title D
Name LETANG, THERESE
Address 1810 ACAPULCO DR
City-State-Zip: MIRAMAR FL 33023

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE-MONIQUE ABRAHAM

PRESIDENT

03/22/2013

Electronic Signature of Signing Officer/Director Detail

Date