

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35086

**FILED**  
**Feb 11, 2015**  
**Secretary of State**  
**CC5348389105**

**Entity Name:** HEAL OUR WORLD INC.

**Current Principal Place of Business:**

1331 LINCOLN ROAD  
APT 1405  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1331 LINCOLN ROAD  
APT 1405  
MIAMI BEACH, FL 33139 US

**FEI Number:** 59-2990507

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DELAWAR, C. STEVEN  
2340 NW 138TH DRIVE  
SUNRISE, FL 33323 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            DELAWAR, STEVEN C  
Address        1331 LINCOLN ROAD  
                  APT 1405  
City-State-Zip: MIAMI BEACH FL 33139

Title            O  
Name            BRODERSON, TRAVIS  
Address        3224 SW 120TH TERRACE  
City-State-Zip: MIRAMAR FL 33025

Title            D  
Name            RODRIGUEZ, JULIE  
Address        2611 N RIVERSIDE DRIVE, APT 507  
City-State-Zip: POMPANO BEACH FL 33062

*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:** STEVEN DELAWAR

**PRESIDENT**

**02/11/2015**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date