FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

Mailing Address

DOCUMENT # M55164 **HEARTWOOD 91-2 INCORPORATED**

FILED Apr 04 1997 8:00am Secretary of State

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% JOHN E. AE 1750 E SUNRIS FT. LAUDERDA	SE BLVD	% John E. A 1750 e Sunr Ft. Lauderd		·	3. Date Incorporated or Qualified 07/08/1987	3a. Date of Last Report 02/27/1996
2. Principal P	lace of Business	2a. Mailing A	ddress		4. FEI Number	Applied For
21		26			65-0003145	Not Applicable
Suite, Apt	#, etc.	Suite, Apt	. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & Sta	te		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zιp	Country	Zip	Co	ountry	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Cu	irrent Registered Ager	it .		10. Name and Address of New Re	sistered Agent
	rvalho, Jean			81 Name		
170	5 E SUNRISE BLVD			82 Street Add	iress (P.O. Box Number is Not Acceptab	le)
FT.	LAUDERDALE FL 33304			83		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				<u> </u>		
				84 City		FL 85 Zip Code
office or r	to the provisions of Sections 607 registered agent or both, in the t im familiar with, and accept the o	State of Florida. Such cl	nange was authoriz	ed by the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changing its registered
SIGNATURE	M		,			A.19-
12.	Signature, typed or panied name of registers	S AND DIRECTORS	(NOTE: Hegister	red Agent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
11TLF	PO			TITLE	7001101010171100010	Change Addition
NAME	ABDO, JOHN E.	<u> </u>	1	NAME		
STREET ADDRESS	1750 E SUNRISE BLVD			STREET ADDRESS		
CITY - \$1 - 74P	FT. LAUDERDALE FL			CITY-ST-ZIP		
TITLE	S		· · · · · · · · · · · · · · · · · · ·	TITLE		Change Addition
NAME	CARVALHO, JEAN	-	F	NAME		
STREET ADDRESS	1750 E.SUNRISE BLVD.			STREET ADDRESS		
CHY-ST-7IP	FT.LAUDERDALE FL			CITY-ST-ZIP		
DILE	T			TITLE		Change Addition
NAME	EANES, JASPER R		3.2	NAME		
STREET ADORESS	1750 E.SUNRISE BLVD.		3.3	STREET ADDRESS		
CITY-ST-ZiF	FT.LAUDERDALE FL		3.4.	CITY-ST-ZIP		
Tittle			DELETE 4.1	TITLE		Change Addition
NAME			4 2	! NAME		
STREET ADDRESS			43	STREET ADDRESS		
CITY - ST - ZIP			4.4	CITY-ST-ZIP		
TITLE			DELETE 5.1	TITLE		Change Addition
KAME			5.2	NAME		
STREET ADDRESS	}		5.3	STREET ADDRESS		
CITY - S1 - 7IP			5.4	CITY-ST-ZIP		
TITLE			DELETE 6.1	TITLE		Change Addition
NAME			6.2	NAME		
STREET ADDRESS			6.3	STREET ADDRESS		
CHTY-S1-ZIF			6.4	CITY-ST-ZIP		
	by certify that the information sur	onlied with this filling do	es not qualify for th	e exemption state	ed in Section 119.07(3)(i). Florida Statute	s I further certify that the

to one receipt calling indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that arm 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 in Block 13 if changed, or on an attachment with an address.