## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)				FILED Apr 21, 2003 8:00 am Secretary of State
DOCUMENT # M90759  1. Entity Name HEARTWOOD HOLDINGS, INC.				04-21-2003 90304 023 ***150.00
				<b>′</b>
1750 E SUNRISE BLVD 1750 E SUNRIS		Mailing Address 1750 E SUNRISE BLVD FT LAUDERDALE FL 3330	4-3013	
2. Principal Place of Business 3. Mailing Address		3. Mailing Address		- I TOUTHOUTH THE TOTAL CONTACTOR OF THE CHAIN C
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 65-0067111 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
<del></del>	6. Name and Address of Current	Registered Agent	<u></u>	7. Name and Address of New Registered Agent
			Name	
BALLOT, ALISSA E 1750 EAST SUNRISE BLVD			Street Addres	s (P.O. Box Number is Not Acceptable)
FORT LAUDERDALE FL 33304				
			City	FL Zip Code
🛴 Afte	Signature, typed or printed name of registered agent FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00		E: Registered Agent signature requ	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
Make Check	k Payable to Florida Department o		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE*  NAME  STREET ADDRESS  CITY-ST-ZIP	D WHITE, JAMES	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVAN, ALAN B. 1750 E SUNRISE BLVD FT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	Change Addition
TITLE NAME STREEY ADDRESS CITY-ST-ZIP	P SARRICA, LEWIS 1750 E SUNRISE BLVD FT LAUDERDALE FL 33304	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BALLOT, ALISSA E 1750 E SUNRISE BLVD FT LAUDERDALE FL 33304	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPT LANG, RICHARD 1750 E SUNRISE BLVD FORT LAUDERDALE FL 33304	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby of indicated of the cor	certify that the information supplied with on this report or supplemental reports poration or the receive or traistee emis-	this filing does not qualify for true and to jurate and that n wered to ejecute this report	the exemption stated in ny signature shall have th as required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director 107, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: