

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002973

FILED
May 01, 2006
Secretary of State

Entity Name: DEVOTED HEARTS, INC.

Current Principal Place of Business:

12406 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161

New Principal Place of Business:

P OBOX 640012
NORTH MIAMI, FL 33179

Current Mailing Address:

1112 S 29 AVE
HOLLYWOOD, FL 33020

New Mailing Address:

P OBOX 640012
MIAMI, FL 33164

FEI Number: 86-1056648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TOUSSAINT, MARIE C
1112 S 29 AVE
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PCED () Delete
Name: TOUSSAINT, MARIE
Address: 1112 S 29 AVE
City-St-Zip: HOLLYWOOD, FL 33020

Title: VD () Delete
Name: CHATELAIN, CHRISTINE R
Address: 1112 S 29 AVE
City-St-Zip: HOLLYWOOD, FL 33020

Title: CFO () Delete
Name: SABY, MARLENE
Address: 16786 N.E. 4 TH PLACE
City-St-Zip: MIAMI, FL 33164

Title: D (X) Delete
Name: PIERRE, MARSHA
Address: 1230 N.E 204 TERRACE
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARIE C TOUSSAINT

PCED

05/01/2006

Electronic Signature of Signing Officer or Director

Date