

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007057

Entity Name: HEART WISDOM CREATIVE GROUP, INC.

FILED
Apr 19, 2004
Secretary of State

Current Principal Place of Business:

10801 SW 51 CT
FT LAUDERDALE, FL 33328

New Principal Place of Business:

Current Mailing Address:

10801 SW 51 CT
FT LAUDERDALE, FL 33328

New Mailing Address:

FEI Number: 57-1184670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIED, JOANNE
10801 SW 51 CT
FT LAUDERDALE, FL 33328

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: D () Delete
Name: FRIED, JOANNE
Address: 10801 SW 51 CT
City-St-Zip: FT LAUDERDALE, FL 33328

Title: D () Delete
Name: FRIED, STEVEN
Address: 10801 SW 51 CT
City-St-Zip: FT LAUDERDALE, FL 33328

Title: D () Delete
Name: OWENS, KATHY
Address: 1051 SW 98 ST
City-St-Zip: PEMBROKE PINES, FL

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOANNE FRIED

D

04/19/2004

Electronic Signature of Signing Officer or Director

Date