

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005376

FILED  
Feb 05, 2009  
Secretary of State

Entity Name: HEARTBEAT INTERNATIONAL WORLDWIDE, INC.

## Current Principal Place of Business:

6800 NORTH DALE MABRY  
#124  
TAMPA, FL 33614 US

## New Principal Place of Business:

## Current Mailing Address:

6800 NORTH DALE MABRY  
#124  
TAMPA, FL 33614 US

## New Mailing Address:

FEI Number: 59-3236060      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MICK, WIL  
6800 NORTH DALE MABRY  
SUITE 124  
TAMPA, FL 33614 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: D ( ) Delete  
Name: MCINTOSH, HENRY D  
Address: P. O. BOX 1788  
City-St-Zip: LAKE LAND, FL 33802

Title: C ( ) Delete  
Name: MANISCALCO, BENEDICT S MD  
Address: 4730 N. HABANA AVNUE, SUITE 201  
City-St-Zip: TAMPA, FL 33614

Title: T ( ) Delete  
Name: MOHAMMED, BASHA G  
Address: 9 BUENA VISTA ST, ELIZABETH GARDENS  
City-St-Zip: ST. JOSEPH W. INDIES, TR

Title: P ( ) Delete  
Name: MICK, WIL  
Address: 6800 N. DALE MABRY, #124  
City-St-Zip: TAMPA, FL 33614

Title: VC (X) Delete  
Name: SALEM, ALBERT M JR  
Address: 4600 W. KENNEDY BLVD STE 100  
City-St-Zip: TAMPA, FL 33618

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition  
Name: MANISCALCO, BENEDICT S MD  
Address: 4730 N. HABANA AVENUE, SUITE 201  
City-St-Zip: TAMPA, FL 33614

Title: T (X) Change ( ) Addition  
Name: MOHAMMED, BASHA G  
Address: 9 BUENA VISTA ST. ELIZABETH GARDENS  
City-St-Zip: ST. JOSEPH W. INDIES, TR

Title: P (X) Change ( ) Addition  
Name: MICK, WIL  
Address: 6800 N. DALE MABRY, #124  
City-St-Zip: TAMPA, FL 33614

Title: VC (X) Change ( ) Addition  
Name: SALEM, ALBERT M JR.  
Address: 4600 W. KENNEDY BLVD STE 100  
City-St-Zip: TAMPA, FL 33618

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

I hereby certify that the information supplied with this filing does not qualify 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: WIL MICK

P

02/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date