2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002539

FILED May 03, 2007 Secretary of State

Entity Name: CARIBBEAN HEART MENDERS ASSOCIATION INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
7320 GRIF SUITE 211 DAVIE, FL		
Current M	lailing Address:	New Mailing Address:
7320 GRIF SUITE 211 DAVIE, FL		
In accordan	: 65-0660138	FEI Number Not Applicable () Certificate of Status Desired (X) of receive the prior notice. Name and Address of New Registered Agent:
FORREST 2700 GUL N/A	Γ, BRENDA LFSTREAM DRIVE R, FL 33023 US	FORREST, BRENDA 5556 SW 82ND PLACE N/A OCALA, FL 34476 US
	e named entity submits this statement for the e of Florida.	ourpose of changing its registered office or registered agent, or bot
SIGNATUI	RE:	05/03/2007
	Electronic Signature of Registered Ag	ent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	P () Delete CHARLTON, WINSOME 7320 GRIFFIN ROAD, SUITE 211 DAVIE, FL 33314	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete DAVIS-SEARS, BARBARA 3633 SW 161 TERRACE MIRAMAR, FL 33027	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete LORNA, BETTY 13392 NW 7TH ST PLANTATION, FL 33325	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete BLAKE, JAY 1560 NW 15TH TERRACE HOMESTEAD, FL 33030	Title: T (X) Change () Addition Name: LEGAIR, OSAFER Address: 902 CORAL CLUB DRIVE City-St-Zip: CORAL SPRINGS, FL 33071
Title: Name: Address: City-St-Zip:	D () Delete GALINDO, ALVARO, 6725 S.W. 122 DRIVE MIAMI, FL 33156	Title: D (X) Change () Addition Name: LEGAIR, LESHAWN Address: 902 CORAL CLUB DRIVE City-St-Zip: CORAL SPRINGS, FL 33071
	D () Delete FORREST, BRENDA,	Title: D (X) Change () Addition Name: FORREST, BRENDA

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: BRENDA FORREST D 05/03/2007