

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001186

FILED
Mar 05, 2010
Secretary of State

Entity Name: NATIONAL INSTITUTE FOR CARDIAC EDUCATION, INC.

Current Principal Place of Business:

16400 COLLINS AVE.
SUITE 1243
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

16400 COLLINS AVE.
SUITE 1243
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 65-0902743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOFFER, ARIEL D DR.
16400 COLLINS AVE.
SUITE 1243
SUNNY ISLES BEACH, FL 33160 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: DR.
Name: SOFFER, ARIEL D
Address: 16400 COLLINS AVE.
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: SD
Name: SOFFER, MINA
Address: 16400 COLLINS AVE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

I hereby 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 all other like empowered.

SIGNATURE: MINA SOFFER

SD

03/05/2010

Electronic Signature of Signing Officer or Director

Date