## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N99000001716

Entity Name: HEARTBRIDGE, INC.

FILED Sep 13, 2002 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5726C FOX HOLLOW DRIVE BOCA RATON, FL 33486 **Current Mailing Address: New Mailing Address:** 5726C FOX HOLLOW DRIVE BOCA RATON, FL 33486 FEI Number: 65-0998856 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STARR, JOAN E 5726C FOX HOLLOW DRIVE BOCA RATON, FL 33486 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MILLER, DAISY JENNY, CAROL Name: Name: 1350 E SUNRISE BLVD Address: 7764 LA MERANDA Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: BOCA RATON, FL 33433 Title: VD () Delete Title: (X) Change ( ) Addition BAZINET, JANE Name: BAZINET, JANE Name: Address: 799 N POWERLINE RD. Address: 799 N POWERLINE RD. City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442 Title: () Delete Title: () Change () Addition ZARIT, LORIN Name: Name: 1511 BURBANK BLVD Address: Address: City-St-Zip: SHERMAN OAKS, CA 91411 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: SCLAR, DIANE Name: 8360 W. OAKLAND PARK Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: () Delete Title: VD. (X) Change ( ) Addition JENNY, CAROL LAGERQUIST, EMILY N Name: Name: 7764 LAMERANDA 6580 ALTURA PLACE Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433

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: CAROL JENNY PD 09/13/2002