

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008908

Entity Name: HEALING HEART, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

180 NEPTUNE DR
HYPOLUXO, FL 33462 US

New Principal Place of Business:

Current Mailing Address:

C/O W.J. TREMBLAY RA.
1801 S. FEDERAL HWY. SUITE 219
DELRAY BEACH, FL 33483 US

New Mailing Address:

JUDY O'CONNOR C.P.A.
595 N.E. 92ND STREET
MIAMI SHORES, FL 33138 US

FEI Number: 65-0986794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TREMBLAY, W.J.
1801 S. FEDERAL HWY.
SUITE 219
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

O'CONNOR, JUDY
595 N.E. 92ND STREET
MIAMI SHORES, FL 33138 US

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: JUDY O'CONNOR

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: KELLER, NANCY
Address: 180 NEPTUNE DR
City-St-Zip: HYPOLUXO, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY KELLER

PTSD

04/25/2005

Electronic Signature of Signing Officer or Director

Date