

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90971 025 ***150.00

DOCUMENT # P00000085329

1. Entity Name
HEART-ID CORPORATION

Principal Place of Business 2450 N.E. MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH FL 33180	Mailing Address 2450 N.E. MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH FL 33180
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-1039513	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SUPRASKI, LOUIS A ESQ. 2450 N.E. MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH FL 33180		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERRY, DAVID 2450 N.E. MIAMI GARDENS DRIVE 2ND FLOOR NORTH MIAMI BEACH FL 33180 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD AUCLAIR, ROLAND 2450 N.E. MIAMI GARDENS DRIVE 2ND FLOOR NORTH MIAMI BEACH FL 33180 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David Perry* Director 4-26-01 Date 305-937-5714 Daytime Phone #

CR2E034 (10/00)

Attachment

#P 00000085329

546277

LAW OFFICES
SMITH & SUPRASKI
PROFESSIONAL ASSOCIATION

2450 N.E. MIAMI GARDENS DRIVE (186TH STREET)

SECOND FLOOR

NORTH MIAMI BEACH, FLORIDA 33180

JOSE SMITH
ATTORNEY AT LAW
LOUIS A. SUPRASKI
BOARD CERTIFIED
REAL ESTATE LAWYER

STEVEN H. ROTHSTEIN
ATTORNEY AT LAW

TELEPHONE
(305) 792-0060
FAX
(305) 792-0061

April 27, 2001

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

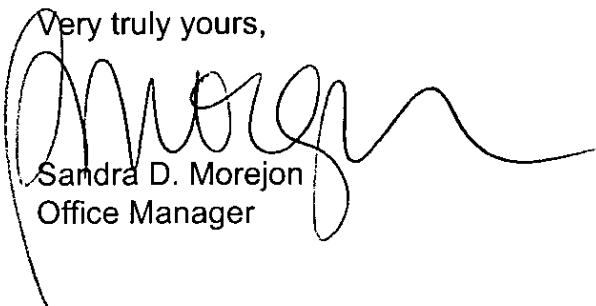
**Re: 2001 Uniform Business Report for:
HEART-ID CORPORATION**

Dear Sir/Madam:

Enclosed please find the 2001 Uniform Business Report for the above referenced corporation, along with our office account check in the amount of \$150.00 representing the filing fee.

Thank you for your assistance in this matter.

Very truly yours,



Sandra D. Morejon
Office Manager

/sdm
Enclosures