2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED
Jan 23, 2008 08:00 AN
Secretary of State

1/17/08 305 595-1668 Daytine Phone #

ANNOAL REPORT				Jan 23, 2000 00:00	
1. Entity Nam	MENT # P0100003278 Y TO THE HEART CORP	2 ·			Secretary of Sta
Principal Place of Business 9199 SW 97 AVE MIAMI, FL 33176 Mailing Address 9199 SW 97 AVE MIAMI, FL 33176				1 P 1 0 1 1	K PINA NSK PIN GAN GAN BAN BANA NKE KAS KEGI TAN MENGET K IPA
DO NOT WRITE IN THIS SPACE			* \$E-		
			01162008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ORTIZ, ERNESTO 9199 SW 97 AVE MIAMI, FL 33176			DO NOT WRITE IN THIS SPACE		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and title If applicable (NOTE: Registered Agent signature required when reinstating) PILE NOWILI FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.					
Aito M	ay 1, 2000 F00 Will 00 \$550.00			33 13 1 333	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT D ORTIZ, ERNESTO 9199 SW 97 AVE MIAMI, FL 33176	CTORS			01/23/08-80106-023 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				_	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP			, •	IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				; , , , , , , , , , , , , , , , , , , ,	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Chaptes 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like attachment.					