2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074405

Entity Name: CAPE HEART GROUP, INC.

FILED Mar 07, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
255 BORN SUITE 202	MAN DRIVE				
	ISLAND, FL 32	953 US			
Current N	lailing Address	s:	New Mailing Addr	ess:	
SUITE 202	MAN DRIVE 2 ISLAND, FL 329	953 US			
	: 65-1129737	FEI Number Applied Fo	r() FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
255 BORN SUITE 202	LIAN A MD MAN DRIVE 2 ISLAND, FL 32	953 US			
	e named entity su e of Florida.	ubmits this statement	for the purpose of changing its registe	ered office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	c Signature of Registe	ered Agent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution	().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/T () [KYLE, JULIAN A 255 BORMAN DF MERRITT ISLANI	RIVE, SUITE 202	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V/S () [PEREZ, VICTOR 255 BORMAN DE MERRITT ISLANI	RIVE, SUITE 202	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JULIAN A. KYLE, MD P/T 03/07/2006