

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000021731

FILED  
Oct 06, 2008  
Secretary of State

**Entity Name:** HEART-HEALTH EDUCATION AND RELATED TOPICS, INC.

**Current Principal Place of Business:**

4905 BROADSTONE CIR  
W PALM BCH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

4905 BROADSTONE CIR  
W PALM BCH, FL 33417

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VEECH, MEGAN  
31101-3171 VILLAGE BLVD. APT 304  
WEST PALM BEACH, FL 33409 US

**Name and Address of New Registered Agent:**

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: WENDY JACOBS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ED ( ) Delete  
Name: VEECH, MEGAN  
Address: 31101-3171 VILLAGE BLVD APT 304  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D ( ) Delete  
Name: SMITH, PHILLIP  
Address: 4905 BROADSTONE CIR  
City-St-Zip: W PALM BCH, FL 33417

Title: FD ( ) Delete  
Name: JACOBS, WENDY  
Address: 4905 BROADSTONE CIR  
City-St-Zip: W PALM BCH, FL 33417

Title: D ( ) Delete  
Name: HARRIS, KENNY  
Address: 823 33RD ST  
City-St-Zip: W PALM BCH, FL 33407

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WENDY JACOBS

Electronic Signature of Signing Officer or Director

FD

10/06/2008

Date