2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000118804

Entity Name: HEALING SPIRIT PRESS, INC.

FILED Mar 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

205 KATHERINE BLVD., #1208 125 E MERRITT ISLAND CSWY

PALM HARBOR, FL 34684 US SUITE 209-307

MERRITT ISLAND, FL 32952 US

Current Mailing Address: New Mailing Address:

205 KATHERINE BLVD., #1208 125 E MERRITT ISLAND CSWY

PALM HARBOR, FL 34684 US SUITE 209-307

MERRITT ISLAND, FL 32952 US

FEI Number: 84-1716709 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRUZZI, ROBERT GAMBAO, CLAIRE A
18 IMPERIAL PLACE 1980 N ATLANTIC AVE

SUITE 4D

PROVIDENCE, FL 0203-4641 US COCOA BEACH, FL 32931 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: CLAIRE A GAMBAO 03/21/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition

Name: VIANA, CARLOS Name: VIANA, CARLOS

 Address:
 205 KATHERINE BLVD., #1208
 Address:
 125 E MERRITT ISLAND CSWY

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 City-St-Zip:
 MERRITT ISLAND, FL 32952 US

Title: VP/D () Delete Title: VP/D (X) Change () Addition

Name: VIANA, PHYLLIS Name: VIANA, PHYLLIS

 Address:
 205 KATHERINE BLVD., #1208
 Address:
 125 E MERRITT ISLAND CSWY

 City-St-Zip:
 PALM HARBOR, FL 34684 US
 City-St-Zip:
 MERRITT ISLAND, FL 32952 US

Title: T/S () Delete Title: T/S (X) Change () Addition

Name: VIANA, PHYLLIS Name: VIANA, PHYLLIS

Address: 205 KATHERINE BLVD., #1208 Address: 125 E MERRITT ISLAND CSWY
City-St-Zip: PALM HARBOR, FL 34684 US City-St-Zip: MERRITT ISLAND, FL 32952 US

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: CLAIRE A GAMBAO, EA AGEN 03/21/2007