

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000085933

FILED
Apr 25, 2011
Secretary of State

Entity Name: HEALING TEAM, INC.

Current Principal Place of Business:

20000 E. COUNTRY CLUB DRIVE
#905
AVENTURA, FL 33180 US

New Principal Place of Business:

20000 E. COUNTRY CLUB DRIVE
3
AVENTURA, FL 33180 US

Current Mailing Address:

20000 E. COUNTRY CLUB DRIVE
#905
AVENTURA, FL 33180 US

New Mailing Address:

18800 NE 29 AVE
#322
AVENTURA, FL 33180 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIROPOL, CINDY
20000 E. COUNTRY CLUB DRIVE
#905
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

MIROPOL, CINDY
18800 NE 29 AVE
#322
AVENTURA, FL 33180 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:

04/25/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVPS
Name: MIROPOL, CINDY
Address: 18800 NE 29 AVE #322
City-St-Zip: AVENTURA, FL 33180 US

I hereby 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 all other like empowered.

SIGNATURE: CINDY MIROPOL

MS

04/25/2011

Electronic Signature of Signing Officer or Director

Date