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CORPORATION ANNUAL REPORT 1995

APPROVED AND FILED

95 MAY -1 PM 3:23

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000014138 (0)

1. Corporate Name: THE HEARTH, INC.

Mailing Address: ~~456 ARTHUR GODFREY RD~~ ~~SUITE 507~~ ~~MIAMI FL 33140~~ ~~US~~

Mailing Address: ~~9 ISLAND AVENUE~~ ~~SUITE 507~~ ~~MIAMI BEACH FL 33140~~ ~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (Year): 03/15/1993

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business: 21 456 ARTHUR GODFREY RD; Suite Apt # etc: 22; City & State: 23 MIAMI BEACH, FL; Zip: 24 33140; Country: 25 USA

2a. Mailing Address: 26 456 ARTHUR GODFREY RD; Suite Apt # etc: 27; City & State: 28 MIAMI BEACH FL; Zip: 29 33140; Country: 30 U.S.A

4. FEI Number: 65-0403538 — Applied For / Not Applicable

5. Certificate of Status Desired: [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: [ ] $5.00 May Be Added to Fees

8. This corporation has ability to elect to be taxed under S 1362 of Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

PERWIN, JEAN S
25 SOUTHEAST SECOND AVENUE
SUITE 623 INGRAHAM BUILDING
MIAMI FL 33131

10. Name and Address of New Registered Agent

01 Name:
02 Street Address (P.O. Box Number is Not Acceptable):
03:
04 City: FL 05 Zip Code:

11. Pursuant to the provisions of Section 607.0505 and 607.0508 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of my position as stated in Florida Statutes.

SIGNATURE: [illegible]

12. OFFICER AND DIRECTOR

TITLE	PD
NAME	FIX, GAIL
STREET ADDRESS	9 ISLAND AVENUE SUITE 507
CITY, ST, ZIP	MIAMI BEACH FL 33139
TITLE	VD
NAME	MILLER, PAMELA
STREET ADDRESS	~~9 ISLAND AVE SUITE 152~~
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	TD
NAME	FIX, KARIN
STREET ADDRESS	800 WEST AVENUE SUITE 211
CITY, ST, ZIP	MIAMI BEACH FL 33139

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE		[ ] Change [ ] Add or
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[ ] Change [ ] Add or
NAME		
STREET ADDRESS	9 ISLAND AVE SUITE 1502	
CITY, ST, ZIP		
TITLE		[ ] Change [ ] Add or
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[ ] Change [ ] Add or
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[ ] Change [ ] Add or
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[ ] Change [ ] Add or
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information stated with the annual report is accurately reflected and does not qualify for the exemption stated in Section 607.0505 Florida Statutes. I further certify that the officers or directors of the corporation or supplemental annual report is true and correct and that my signature shall serve the same purpose as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as defined in Section 817.155 Florida Statutes. I am aware that I am liable for damages and penalties and may be prosecuted if I knowingly submit false information with an address.

SIGNATURE: Gail Fix GAIL FIX — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 5/1/95 — (305) 538-3358

0140993 CP