

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000073914 (0)

1. Corporation Name

HEALING TECHNOLOGIES, INC.



Principal Place of Business

11040 SEA HIBISCUS LANE
TAMARAC FL 33321

Mailing Address

11040 SEA HIBISCUS LANE
TAMARAC FL 33321

2. Principal Place of Business

2a. Mailing Address

21 940 SWEETWATER LANE

26 940 SWEETWATER LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE #504

27 SUITE #504

City & State

City & State

23 BOCA RATON FL.

28 BOCA RATON FL.

Zip

Country

Zip

Country

24 33431

25 U.S.A.

29 33431

30 U.S.A.

3. Date Incorporated or Qualified

09/22/1995

3a. Date of Last Report

4. FEI Number

65-0616031

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 liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FICARRO, ELLEN
11040 SEA HIBISCUS LANE
TAMARAC FL 33321

10. Name and Address of New Registered Agent

81 Name

SUSAN JEFFERBAUM

82 Street Address (P.O. Box Number is Not Applicable)

940 SWEETWATER LANE

83

SUITE #504

84 City

BOCA RATON

FL

85 Zip Code
33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Susan Jefferbaum

SUSAN JEFFERBAUM

DATE

4/29/96

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☒ DELETE

NAME ELLEN FICARRO
STREET ADDRESS 11040 SEA HIBISCUS LANE

CITY-ST-ZIP TAMARAC FL. 33321 ☐ DELETE

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

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CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT ☒ Change ☐ Addition

1.2 NAME

SUSAN JEFFERBAUM

1.3 STREET ADDRESS

940 SWEETWATER LANE ☐ Change ☐ Addition

1.4 CITY-ST-ZIP

BOCA RATON, FL. 33431 ☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

4/29/96

CR2E034 (12/95)