

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED

98 APR 27 AM 10:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000086626 (4)

1. Corporation Name

HEART LABS OF AMERICA, INC.



Principal Place of Business

1903 S. CONGRESS AVE.  
SUITE 400  
BOYNTON BEACH FL 33426-6559

Mailing Address

1903 S. CONGRESS AVE.  
SUITE 400  
BOYNTON BEACH FL 33426-6559

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/21/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		-APPLIED FOR 65-0809930	
24 Country		29 Country		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				7. This corporation owes or has paid the current year intangible	
				Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

KOBRIN, ARTHUR  
1903 S. CONGRESS AVE.  
SUITE 400  
BOYNTON BEACH FL 33426

10. Name and Address of New Registered Agent

81 Name	Corporation Service Company
82 Street Address (P.O. Box Number is Not Acceptable)	1201 Hays Street
83	
84 City	Tallahassee
85 Zip Code	FL 32301

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: *Karen B. Rozar* Karen B. Rozar, As Its Agent 4-27-98  
(NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Pres./Director
NAME	PERSHES, PAUL	1.2 NAME	PAUL C. PERSHES
STREET ADDRESS	1903 S. CONGRESS AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33426-6559	1.4 CITY-ST-ZIP	
TITLE	CFO	2.1 TITLE	CFO/SEC.
NAME	KOBRIN, ARTHUR	2.2 NAME	Arthur Kabin
STREET ADDRESS	1903 S. CONGRESS AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33426-6559	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	200002504062-5
NAME		3.2 NAME	-04/28/98--01124--006
STREET ADDRESS		3.3 STREET ADDRESS	****150.00 ****150.00
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Karen B. Rozar*

CR2E034 (10/97)