

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

FILED

**May 08 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000036935 (9)
1. Corporation Name
HEART TO HEART BASKETS, INC.



Principal Place of Business: 1571 HAMMOCK LANE, PEMBROKE PINES FL 33026
Mailing Address: 1571 HAMMOCK LANE, PEMBROKE PINES FL 33026

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/24/1997

4. FEI Number: 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 1530 NW 109 TERRACE, Suite, Apt. #, etc.
22 City & State: PEMBROKE PINES, FLA.
23 Zip: 33026, Country: U.S.A.

2a. Mailing Address: 26 1530 NW 109 TERRACE, Suite, Apt. #, etc.
27 City & State: PEMBROKE PINES, FLA.
28 Zip: 33026, Country: U.S.A.

9. Name and Address of Current Registered Agent: CRUZ, JOANNE C, 1571 HAMMOCK LANE, PEMBROKE PINES FL 33026

10. Name and Address of New Registered Agent: 81 Name: CRUZ, JOANNE C, 82 Street Address: 1530 NW 109 TERRACE, 83 City: PEMBROKE PINES, FL, 84 Zip Code: 33026

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 607.0508, Florida Statutes.

SIGNATURE: *Joanna Cruz* JOANNA CRUZ, PRESIDENT, DATE: 4-25-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRUZ, JOANNE C	1.2 NAME	CRUZ, JOANNE C
STREET ADDRESS	1571 HAMMOCK LANE	1.3 STREET ADDRESS	1530 NW 109 TERRACE
CITY-ST-ZIP	PEMBROKE PINES FL 33026	1.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRUZ, RICHARD F	2.2 NAME	CRUZ, RICHARD F
STREET ADDRESS	1571 HAMMOCK LANE	2.3 STREET ADDRESS	1530 NW 109 TERRACE
CITY-ST-ZIP	PEMBROKE PINES FL 33026	2.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *Joanna Cruz* JOANNA CRUZ, DATE: 4-25-98 (054) 457 0765

CR2E034 (10/97)