## 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

DOCUMENT # P9700038960 (5)

## FILED Apr 03 1998 8:00am Secretary of State

	FROM THE HEART, INC.				
Principal Plac	ce of Business	Mailing Address			48501 10160 10110 01131 0031 1001
4108 WEST NORMA AVENUE 4108 WEST NORMA TAMPA FL 33611 TAMPA FL 33611			ENUE	DO NOT MIDITE IN THE	IO ODAOT
				DO NOT WRITE IN THI	IS SPACE.
				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a, Mailing Address		04/30/1997 4. FEI Number	Applied for
21		26		59-3443432	Not Applicable
Suite, Apt	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	ю	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curr	eni Hegisterea Agent	81 Name	10. Name and Address of New Registere	ed Agent
ROSENTHAL, ORIT T 4108 WEST NORMA AVENUE					
			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
IAI	MPA FL 33611		83		
			84 City	F	85 Zip Code
office or r agent I a SIGNATURE	registered agent, or both, in the Sta im familiar with, and accept the obli- Signature, typed or proted name of registered a		s authorized by the corpor forida Statutes.  OTE Registered Agent signature rec	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE	7.00/110/10/01/01/02/01/01/01/01/01/01/01/01/01/01/01/01/01/	Change Addition
NAME	ROSENTHAL, ORIT T		1.2 NAME		
STREET ADDRESS	4108 WEST NORMA AVENU	E	I i		
City-St-ZiP	TAMPA FL 33611	· <b>—</b>	1.3 STRELT ADDRESS		
TITLE			1.3 STRELT ADDRESS 1.4 CITY- ST- ZIP		
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'			1.4 CITY- ST- ZIP		☐ Change ☐ Addition
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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.