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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9800036747

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90048 042 ***150.00

1. Corporation Name									
THE HE	aling basket, inc.					1 (BO)(BA) (10 (B)O) (B()) ADSII AB(()	ANTII ARIRE IIISE NI		in (48) (10)
				•					
Principal Plac	e of Business	Mailing	Address		•	I ISBNESI IIS ISISI ISIN SENI SENI	2011 20122 11112 414	:88:: 8:4	ett thei teet
2617 GREENBELT YARD 2617 GREENBELT YARD									
SARASOTA FL 34235 SARASOTA FL 34235					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 04/20/1998			
2. Principal P	lace of Business	2a. Ma	iling Address			4. FEI Number	_		ed For
21		26				65-090421	7 0	Not A . 75 Ad	Applicable
			ite, Apt. #, etc.	<u> </u>		5. Certifcate of Status Desired		ee Requ	
22 27 City & State City & State			v & State			6, Election Campaign Financing		5.00 M	av Be
23 28					Trust Fund Contribution Added to Fees				
Zip	Country Zip			Country				751.	
24	25 29 30			30		Personal Property Tax. 10. Name and Address of New Re	gistered Agent		No
	9. Name and Address of Curren	t Registere	d Agent	81	Name	10. Name and Address of New Re	Aistalen Wall		
BUR	RKHART, CAROLE M								
2617 GREENBELT YARD				82	Street Add	dress (P.O. Box Number is Not Acceptab	(8)		}
SARASOTA FL 34235				83					
				84	City		85	Zip Co	de
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes.					} *		FL 8	ina ita sa	reintered
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050: registered agent, or both, in the State am familiar with, and accept the obligat	2 and 607.1 of Florida. S tions of, Sec	508, Florida Statute Such change was au ction 607.0505, Flori	s, the apov thorized by da Statutes	e-named col the corpora :	rporation submits this statement for the pi tion's board of directors. I hereby accept	the appointment	as regis	stered
SIGNATURE							DATE	·····	
12,	Signature, typed or printed name of registered ager OFFICERS AN			13.	it signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFI		ECTOR	S IN 12
TITLE	President		☐ DELETE	1.1 TITLE			CI		Addition
NAME.	Carole Burkha	rt	011	1.2 NAME	}				1
STREET ADDRESS	Carole Burkha 3402 Coronado	Dr-	#2211	1.3 STREE	TADDRESS				
CITY-ST-ZIP	Sarasola FL	<u> 34</u>		1.4 CITY-S	T-ZIP				Addition
TITLE	Sec/Treas.	_	☐ DELETE	2.1 TITLE	}		□ Ct	nange	Addition
NAME	Deborah Weber	ur HL	2211	2.2 NAME	TADORESS				
STREET ADDRESS	3402 Coronado D Sarasota R 3	11231	-0-11	2.4 CITY-5					
CITY-ST-ZIP	Sarasom ru 3	4121	DELETE	3.1 TITLE	71-23			nange	Addition
NAME				3.2 NAME		·			
STREET ADDRESS	;			3.3 STREE	TADDRESS				1
Crty-ST-ZIP				3.4. CITY-5	ST-ZIP				
TITLE			☐ DELETE	4.1 TITLE				hange	☐ Addition
NAME	İ			4. 2 NAME					}
STREET ADDRESS					TADORESS		•		
CITY-ST-ZIP TITLE			☐ DELETE	4.4 CITY-S 5.1 TITLE	1-ZIP			nange	Addition
NAME				5.2 NAME					1
1			•	5.3 STREE	TADODECC				ì
STREET ADDRESS	5				ADURESS				I
STREET ADDRESS CITY-ST-ZIP				5.4 CITY-S	- 1				
			☐ DELETE	5.4 CITY-S 6.1 TITLE	- 1			nange	Addition
CITY-ST-ZIP TITLE NAME			☐ DELETE	5.4 CITY-S 6.1 TITLE 6.2 NAME	Y-ZIP			nange	Addition
CITY-ST-ZIP			☐ DELETE	5.4 CITY-S 6.1 TITLE 6.2 NAME	T-ZIP			nange	Addition

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, with all other like empowered.

SIGNATURE: Carole SMB BUTENALT RICAGULATED BURLOUT 3/30/99 941-929-9263

A. Carrieran