DOCUMENT # S54736

1. Entity Name

HEARTWOOD 7, INC.

Principal Place of Business

Mailing Address

1750 EAST SUNRISE BLVD. FORT LAUDERDALE FL 33304 1750 EAST SUNRISE BLVD. FORT LAUDERDALE FL 33304

2. Principal Place of Business	3. Mailing Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State	City & State				

FILED Apr 30, 2001 8:00 am Secretary of State

04-30-2001 90067 043 ***150.00



Suite, Apt. #, etc. Suite,		3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
		City & State	/ & State		4. FEI Number 65-0294581		Applied For Not Applica	
Zip	Country	Zip	Country		5. Certificate of Status Desired		8.75 Additional ee Required	
	6. Name and Address of Current F	Registered Agent			7. Name and Address of New	Registered A	gent	
FURMAN, JACK A 1750 EAST SUNRISE BLVD. FORT LAUDERDALE FL 33304			Name Jarett S. Levan Street Address (P.O. Box Number is Not Acceptable) 1/50 E. Sunrise Blvd.					
			City	ort Lau	derdale		Zip Code 33304	
8. The above r	named entity submits this statement for	the purpose of changing its	registered office	ce or registere	d agent, or both, in the State of	Florida.		
SIGNATURE _	1 and	Jarett S.	Levan			4/2	ماما	
	signature, typed or printed name of registered agent a		E. Registered Agent	signature required w	hen reinstating)	2TAC		
	ation is eligible to satisfy its Intangible equirement and elects to do so. a on back)	FILE NOW After MAY 1, 20 Make Check Payal		e \$550.00	10. Election Campaign Trust Fund Contribu	~ ~	\$5.00 May B Added to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO O	FFICERS AND	DIRECTORS IN 11	
NAME STREET ADDRESS CITY-ST-ZP	D LEVAN, ALAN 1750 E. SUNRISE BLVD. FORT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADOR CITY-ST-7IP	1			□ Change □ Addi	
NAME STREET ADDRESS	PD GRIECO, FRANK 1750 E. SUNRISE BLVD. FORT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP				☐ Change ☐ Addi	
STREET ADDRESS	V ABER, WILLIAM L. 1750 E. SUNRISE BLVD. FORT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDI CITY-ST-ZIP	1		****	Change Addi	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LEVAN, JARETT S 1750 E. SUNRISE BLVD. FORT LAUDERDALE FL 33304	☐ De'ete	TITLE NAME STREET AOOI CITY - ST - ZIF				□ Change □ Addi	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDI CITY-ST-ZE	ļ			☐ Change ☐ Addi	
TITLE NAME STREE! ADDRESS CITY-ST-ZIP	ertify that the information supplied with	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZIF	,			Change Add	

indicated on this report or supplemental roport 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Jarett S. Levan

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-585-2710

Daytime Phone #