

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

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90167 038 ***150.00

DOCUMENT # V40624

1. Corporation Name
HEARTWOOD 19, INC.

Principal Place of Business
1750 E. SUNRISE BLVD.
FT. LAUDERDALE FL 33304

Mailing Address
1750 E. SUNRISE BLVD.
FT. LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/02/1992

4. FEI Number

65-0249346

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 the current year intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARVALHO, JEAN
1750 E. SUNRISE BLVD.
FT. LAUDERDALE FL 33304

81 Name JACK A. FURMAN ESQ.

82 Street Address (P.O. Box Number is Not Acceptable) 1750 E. SUNRISE BLVD.

83

84 City FT. LAUDERDALE FL 85 Zip Code 33304

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

Signature, typed or printed name of registered agent and title, if applicable. (NOT E: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME LEVAN, ALAN
STREET ADDRESS 1750 E. SUNRISE BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME GRIECO, FRANK V.
STREET ADDRESS 1750 E. SUNRISE BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME ABER, WILLIAM L.
STREET ADDRESS 1750 E. SUNRISE BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☒ DELETE

NAME CARVALHO, JEAN
STREET ADDRESS 1750 E. SUNRISE BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☒ DELETE

NAME EANES, JASPER R.
STREET ADDRESS 1750 E. SUNRISE BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ 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 a holder like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JARETT S. LEVAN

2/05/99

954-760-5405

Date

Daytime Phone #

CR2E034 (11/98)

0281554