## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000102930

Entity Name: HEALTH AND HYGIENE, INC.

FILED Apr 11, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4406 EXCHANGE AVE., #127 4406 EXCHANGE AVE., #119

NAPLES, FL 34104 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

4406 EXCHANGE AVE., #127 4406 EXCHANGE AVE., #119

NAPLES, FL 34104 NAPLES, FL 34104

FEI Number: 20-3194839 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.

5811 PELICAN BAY BLVD., SUITE 600

NAPLES, FL 34108 US

SHAW, BONNIE

4406 EXCHANGE AV

SUITE 119

APLES, FL 34108 US SUITE 119
NAPLES, FL 34104 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BONNIE SHAW 04/11/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: CO

Name: FOWLER WHITE BOGGS BANKER P.A. Address: 5811 PELICAN BAY BLVD., SUITE 600

City-St-Zip: NAPLES, FL 34108 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: FOWLER WHITE BOGGS BANKER P.A. CO 04/11/2010