2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001067

Address:

City-St-Zip:

Entity Name: THE HEALTH TELEVISION SYSTEM INC.

3959 NORTH BUFFALO ROAD

ORCHARD PARK, NY 14127

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
62 WESTMOUNT AVE. TORONTO ONTARIO M6H 3K1,			62 WESTMOUNT AVE. TORONTO, ON M6H 3K1 CA		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	RTH BUFFALC D PARK, NY				
FEI Number	: 98-0188746	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 200	TH MILITARY				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ac	gent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BERNS, MARV	BUFFALO ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DVS (KASTNER-BER) Delete RNS. KATHY	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBIN BRAND CPA 01/21/2009