

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90566 008 ***150.00

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1. Entity Name
HYGEIA INTERNATIONAL, INC.



Principal Place of Business
15500 NEW BARN RD.
SUITE #200
MIAMI, FL 33014

Mailing Address
15500 NEW BARN RD.
SUITE #200
MIAMI, FL 33014

20030000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122005

Chg-P

CR2E034 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MATZNER, GARY C ESQ.
201 SOUTH BISCAYNE BLVD.
22ND FLOOR
MIAMI, FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CP ☐ Delete
NAME BRETZ, VIRGIL
STREET ADDRESS 15500 NEW BARN RD., SUITE #200
CITY-ST-ZIP MIAMI, FL 33014

TITLE VV ☐ Delete
NAME ANGELONE, DAVID
STREET ADDRESS 15500 NEW BARN RD., SUITE #200
CITY-ST-ZIP MIAMI, FL 33014

TITLE S ☐ Delete
NAME MATZNER, GARY C
STREET ADDRESS 15500 NEW BARN RD., SUITE #200
CITY-ST-ZIP MIAMI, FL 33014

TITLE VD ☐ Delete
NAME MEHRA, VICTOR
STREET ADDRESS 15500 NEW BARN RD., SUITE #200
CITY-ST-ZIP MIAMI, FL 33014

TITLE V ☐ Delete
NAME GNISCI, FRANK J
STREET ADDRESS 15500 NEW BARN RD., SUITE #200
CITY-ST-ZIP MIAMI, FL 33014

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Assistant Secretary
STREET ADDRESS Jean M Edwards
CITY-ST-ZIP 15500 New Barn Rd Ste 200
Miami Lakes FL 33014

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jean M. Edwards Jean M. Edwards

4-12-05

305-594-9291 X2223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #