

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 12, 2007 8:00 am
Secretary of State

07-12-2007 90057 019 ***150.00

DOCUMENT # P01000041563

1. Entity Name
HYGEIA HEALTH AND SAFETY SERVICES, INC.



Principal Place of Business
**7002 WILLOW RUN LOOP
LAKELAND, FL 33813**

Mailing Address
**P.O. BOX 6732
LAKELAND, FL 33807-6732**

AC



07062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3715357	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHREIBER, ALLAN E
7002 WILLOW RUN LOOP
LAKELAND, FL 33813**

**DO NOT WRITE
IN THIS SPACE**

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 \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SCHREIBER, ALLAN E 7002 WILLOW RUN LOOP LAKELAND, FL 33813
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALLAN E. SCHREIBER 7/5/07 813-757-4097

Date

Daytime Phone #

ATTACHMENT 40124631

001000047563

HYGEIA

Health and Safety Services, Inc.

July 5, 2007

Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314

Re: 2007 For Profit Corporation Annual Report

Dear Sir/Madam:

Attached is the 2007 For Profit Corporation Annual Report. The notice of intent to dissolve is the first notice received. Enclosed is \$150 for renewal. We request abatement of the late penalty because of some error in receipt of the original notification. Please contact me at your convenience if you require additional information. Thank you for your attention to this matter.

Sincerely,

Hygeia Health & Safety Services, Inc.



Allan E. Schreiber, CIH
President