## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000108503

BOWES, DOROTHY

DELTONA, FL 32738

2241 FLORIDA DRIVE #1

Name:

Address:

City-St-Zip:

FILED May 01, 2007 Secretary of State

Entity Nan	ne: HEAR <sup>-</sup>	ΓENVIRONMENTAL, INC.				
Current Pi	incipal Pla	ce of Business:	New Princi	New Principal Place of Business:		
1241 DOVE APOPKA, F	ER CIRCLE FL 32703					
Current Mailing Address:			New Mailin	New Mailing Address:		
1241 DOVE APOPKA, F	ER CIRCLE FL 32703					
FEI Number:	59-3751184	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )		
Name and	Address o	f Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
ANDERSON, RALPH 820 LAKE KATHRINE CIRCLE CASSELBERRY, FL 32707 US			820 LAKE K	ANDERSON, RALPH 820 LAKE KATHRYN CIRCLE CASSELBERRY, FL 32707 US		
The above in the State		ty submits this statement for the p	ourpose of changing its	s registered office or registered agent, or both	٦,	
SIGNATUR	RE:			05/01/2007		
	Elect	onic Signature of Registered Age	ent	Date	_	
		.193(2)(b), F.S., the corporation did no sing Trust Fund Contribution ( ).	t receive the prior notice	э.		
OFFICERS	AND DIR	ECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTO	ORS:	
Title: Name: Address: City-St-Zip:	TD HENDRIX, N 1241 DOVE APOPKA, FI	R CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPD HENDRIX, E 1241 DOVE APOPKA, FI	RCIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	PD ANDERSON 1007 TUDHO SANFORD,	DPE	Title: Name: Address: City-St-Zip:	PSD (X) Change ( ) Addition ANDERSON, RALPH 1620 LITTLE GEM LOOP SANFORD, FL 32773		
Title:	SD	(X) Delete	Title:	( ) Change ( ) Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RALPH ANDERSON Ρ 05/01/2007