

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000055392

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** HYGIENICS INDUSTRIES, INC.

**Current Principal Place of Business:**

3968 194TH TR  
SUNNY ISLES BCH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

3968 194TH TR  
SUNNY ISLES BCH, FL 33160

**New Mailing Address:**

**FEI Number:** 23-2274937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRIER, MICHAEL  
3968 194TH TR  
SUNNY ISLES BCH, FL 33160 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BRIER, MICHAEL  
**Address:** 3968 194TH TR  
**City-St-Zip:** SUNNY ISLES BCH, FL 33160

**Title:** D  
**Name:** FORTUNAS-BRIER, MARIE  
**Address:** 3968 194TH TR  
**City-St-Zip:** SUNNY ISLES BCH, FL 33160

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:** MARIE FORTUNAS-BRIER

D

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date