

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000034219

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** HEALTHY ENVIRONMENT INSPECTION & REPAIR SERVICES, INC.

**Current Principal Place of Business:**

ELDORADO PLAZA EAST, UNIT 8C  
201 N.E. 14TH AVENUE  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

ELDORADO PLAZA EAST, UNIT 8C  
201 N.E. 14TH AVENUE  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

**FEI Number:** 27-2405462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

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

ARABIA, THOMAS J  
ELDORADO PLAZA EAST, UNIT 8C  
201 N.E. 14TH AVENUE  
HALLANDALE BEACH, FL 33009 US

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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** THOMAS, ARABIA J  
**Address:** 201 NE 14TH AVENUE UNIT 8C  
**City-St-Zip:** HALLANDALE BEACH, FL 33009

**Title:** VP  
**Name:** ARABIA, THOMAS J III  
**Address:** 201 N.E. 14TH AVENUE UNIT 8C  
**City-St-Zip:** HALLANDALE BEACH, FL 33009

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:** THOMAS J. ARABIA

PRES

02/17/2011

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

\_\_\_\_\_  
Date