

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90059 036 \*\*\*150.00

0380124

**DOCUMENT # P98000077655**

1. Entity Name

**HEALTHIER HOME SYSTEMS, INC.**

Principal Place of Business

Mailing Address

113 SOUTH MAIN STREET  
LAKE PLACID FL 33852

113 SOUTH MAIN STREET  
LAKE PLACID FL 33852

2. Principal Place of Business

3. Mailing Address

3113 Peachtree Dr.

3113 Peachtree Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Lake Placid, FL

Lake Placid, FL

4. FEI Number

59-3537988

Applied For

Not Applicable

Zip

Country

Zip

Country

33852

US

33852

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

**BRODER, DANNY**  
 113 SOUTH MAIN STREET  
 LAKE PLACID FL 33852

Name

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

3113 Peachtree Dr.

City

Lake Placid

FL

Zip Code

33852

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	BRODER, DANNY	113 SOUTH MAIN STREET	LAKE PLACID FL 33852	<input type="checkbox"/>
D	BRODER, BRENDA	113 SOUTH MAIN STREET	LAKE PLACID FL 33852	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		3113 Peachtree Dr.	Lake Placid, FL 33852	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		3113 Peachtree Dr	Lake Placid, FL 33852	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Brenda Broder Brenda Broder 1/04/01 863-699-5869  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)