

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090034

FILED  
Feb 28, 2011  
Secretary of State

**Entity Name:** HYPERHIDROSIS ADVISORY TEAM, INC.

**Current Principal Place of Business:**

1250 E HALLANDALE BCH BLVD  
805  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

1250 E HALLANDALE BCH BLVD  
805  
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number:** 65-0897248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: CHAUSER, ANDREW  
Address: 1250 E. HALLANDALE BEACH BLVD. SUITE 805  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DST  
Name: CHAUSER, RONIT  
Address: 1250 E. HALLANDALE BEACH BLVD. SUITE 805  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DST  
Name: MEYER, ROBERT C  
Address: 1250 E. HALLANDALE BEACH BLVD. SUITE 805  
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: ANDREW CHAUSER

P

02/28/2011

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

\_\_\_\_\_  
Date