

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 25, 2007 8:00 am
Secretary of State

07-25-2007 90045 031 ***150.00

DOCUMENT # P99000077241

1. Entity Name
HEAR WELL, INC.



Principal Place of Business
10071 PINES BLVD
STE C
PEMBROKE PINES, FL 33024

Mailing Address
10071 PINES BLVD
STE C
PEMBROKE PINES, FL 33024

40127018



07172007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0945481

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ODORISIO, FALCO R
2909 S. OCEAN BLVD., #1E
HIGHLAND BEACH, FL 33487

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ODOLISIO, FALCO
STREET ADDRESS	2909 S. OCEAN BLVD., #1E
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR


Date

Daytime Phone #

[Handwritten Signature]
7/17/07
JULY

2007 FOR PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

DOCUMENT # P99000077241	
1. Entity Name HEAR WELL, INC.	

Principal Place of Business 10071 PINES BLVD STE C PEMBROKE PINES, FL 33024	Mailing Address 10071 PINES BLVD STE C PEMBROKE PINES, FL 33024
--	--

DO NOT WRITE IN THIS SPACE

40127018

03282007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0945481	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ODORISIO, FALCO R
2909 S. OCEAN BLVD., #1E
HIGHLAND BEACH, FL 33487

DO NOT WRITE
IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ODORISIO, FALCO 2909 S. OCEAN BLVD., #1E HIGHLAND BEACH, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  4/10/07 991-437-5333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

Doc. # 11-10-07 # 1107

ATTACHMENT

40127018

#299000077247

LIST SOURCE OF DEPOSITS AND INFORMATION ABOUT EXPENDITURES ON BACK OF PRECEDING STOPS

1106

West 3/10/07

DATE 3/10/07

PAY TO Helen Rana

FOR refund 1/12

DEPOSITS	
TOTAL	
THIS CHECK	2500-
OTHER TRANS +/-	
TAX DEDUCTIBLE <input type="checkbox"/>	
BALANCE	

1107

DATE 4/10/07

PAY TO The State of Texas

Division of Transportation

FOR Travel Report

DEPOSITS	
TOTAL	
THIS CHECK	150-
OTHER TRANS +/-	
TAX DEDUCTIBLE <input type="checkbox"/>	
BALANCE	

1108

DATE 8/11/07

PAY TO American Express

FOR Meeting

DEPOSITS	
TOTAL	
THIS CHECK	1190007

ATTACHMENT

40127018

July 18, 2007

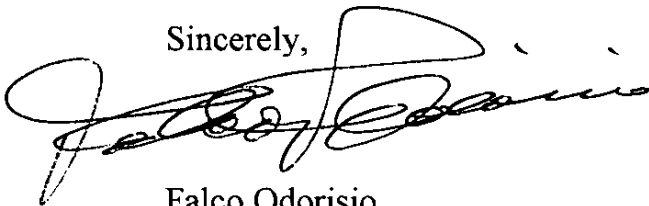
Division of Corporations
PO Box 8800
Tallahassee, FL 32314

RE: Document # P99000077241
Hearwell Inc

To Whom It May Concern:

I received my annual corporation report and back on April 10, 2007 I signed and sent a check for \$150. Apparently my check was lost in the mail because you sent out a card that I had not filed yet. Please see attached copy that I had signed and mailed back in April, also a copy of my check voucher that shows I did write out the check for \$150. I have attached copies of all of these along with a new check for \$150 and a new signed copy I downloaded from your website. Any further questions, please feel free to contact my office. Thank you very much.

Sincerely,

A handwritten signature in black ink, appearing to read 'Falco Odorisio', written over a horizontal line.

Falco Odorisio
Hearwell Inc