

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000005239

FILED
Nov 03, 2005
Secretary of State

Entity Name: HUDSON MARINE MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

3 EXECUTIVE CAMPUS, SUITE 230
CHERRY HILL, NJ 08002

New Principal Place of Business:

4350 HADDONFIELD ROAD
SUITE 302
PENNSAUKEN, NJ 08109

Current Mailing Address:

3 EXECUTIVE CAMPUS, SUITE 230
CHERRY HILL, NJ 08002

New Mailing Address:

4350 HADDONFIELD ROAD
SUITE 302
PENNSAUKEN, NJ 08109

FEI Number: 22-3730573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PETER SOUZA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: CHRISTENSEN, PER W
Address: 1166 SEWELL LANE
City-St-Zip: RYDAL, PA 19046

Title: V () Delete
Name: HUDSON, CYNTHIA A
Address: 1166 SEWELL LANE
City-St-Zip: RYDAL, PA 19046

Title: SD () Delete
Name: GALANO, DOMINICK G
Address: 28810 KING ARTHUR COURT
City-St-Zip: RANCH PALO VERDES, CA 90275

Title: D () Delete
Name: LUCORCIO, RALPH V
Address: 1499 MERRICK ROAD
City-St-Zip: YARDLEY, PA 19067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PER W CHRISTENSEN

P

11/03/2005

Electronic Signature of Signing Officer or Director

Date