

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000158043

FILED  
Oct 09, 2006  
Secretary of State

Entity Name: HSMA CORP

## Current Principal Place of Business:

2112 7TH ST.  
WIMAUMA, FL 33598

## New Principal Place of Business:

708 JOHNSON DR  
RUSKIN, FL 33570

## Current Mailing Address:

2112 7TH ST.  
WIMAUMA, FL 33598

## New Mailing Address:

708 JOHNSON DR  
RUSKIN, FL 33570

FEI Number: 59-3774346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, SONIA  
2112 7TH ST.  
WIMAUMA, FL 33598 US

## Name and Address of New Registered Agent:

MORALES, SONIA  
708 JOHNSON DR  
RUSKIN, FL 33570 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: SONIA MORALES

10/09/2006

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: P ( ) Delete  
Name: ITURRIAGA, HECTOR  
Address: 2112 7TH ST.  
City-St-Zip: WIMAUMA, FL 33598

Title: V ( ) Delete  
Name: MORALES, SONIA  
Address: 2112 7TH ST.  
City-St-Zip: WIMAUMA, FL 33598

Title: S ( ) Delete  
Name: MUNOZ, MARIA  
Address: 2112 7TH ST.  
City-St-Zip: WIMAUMA, FL 33598

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ITURRIAGA, HECTOR  
Address: 708 JOHNSON DR  
City-St-Zip: RUSKIN, FL 33570

Title: V (X) Change ( ) Addition  
Name: MORALES, SONIA  
Address: 708 JOHNSON DR  
City-St-Zip: RUSKIN, FL 33570

Title: S (X) Change ( ) Addition  
Name: MUNOZ, MARIA  
Address: 708 JOHNSON DR  
City-St-Zip: WIMAUMA, FL 33570

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: HECTOR ITURRIAGA

P

10/09/2006

Electronic Signature of Signing Officer or Director

Date