## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F04000005368

Entity Name: HELIX GLOBAL SOLUTIONS (USA) INC.

FILED Sep 06, 2006 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

7500 NW 25TH STREET UNIT 9 2101 NW 82ND AVENUE MIAMI, FL 33122 US MIAMI, FL 33122 US

Current Mailing Address: New Mailing Address:

2525 COHEN STREET
SAINT-LAURENT QUEBEC
CANADA H4R 2N5,
XX
2101 NW 82ND AVENUE
MIAMI, FL 33122 US

FEI Number: 98-0435211 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 US
LECANNE, CHRISTOPHE
2101 NW 82ND AVENUE
MIAMI, FL 33122 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: CHRISTOPHE LECANNE 09/06/2006

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: CD (X) Change () Addition

 Name:
 SHADEED, BRUCE
 Name:
 SHADEED, BRUCE

 Address:
 2525 COHEN STREET, SAINT-LAURENT
 Address:
 4612 CHEMIN BOIS FRANC

City-St-Zip: QUEBEC CANADA H4R2N5, City-St-Zip: ST LAURENT, PQ H4S 1A7 CA

Title: DVP ( ) Delete Title: DP (X) Change ( ) Addition Name: COLELLA, CARLO Name: AJRAM, DOUGLAS

Address: 2525 COHEN STREET, SAINT-LAURENT Address: 4612 CHEMIN BOIS FRANC
City-St-Zip: QUEBEC CANADA H4R2N5, City-St-Zip: ST LAURENT, PQ H4S 1A7 CA

Title: ST ( ) Delete Title: ST (X) Change ( ) Addition

Name: SHADEED, GERRY Name: ASSI, NEHMAN

Address: 2525 COHEN STREET, SAINT-LAURENT Address: 4612 CHEMIN BOIS FRANC
City-St-Zip: QUEBEC CANADA H4R2N5, City-St-Zip: ST LAURENT, PQ H4S 1A7 CA

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: DOUGLAS AJRAM DP 09/06/2006