2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000004536

Entity Name: H.U.S., INC.

FILED Oct 10, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4100 GULF BREEZE PKWY 5680 GULF BREEZE PARKWAY GULF BREEZE, FL 32563

BUILDING D, UNIT 10 GULF BREEZE, FL 32563

Current Mailing Address: New Mailing Address:

43 OYSTER BAY ROAD 19 HARBOR CIRCLE LOCUST VALLEY, NY 11560 CENTERPORT, NY 11721

FEI Number: 20-3188270 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

O'CONNOR, KEVIN 5680 GULF BREEZE PARKWAY BUILDING D, UNIT 10 GULF BREEŻE, FL 32563 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: KEVIN O'CONNOR 10/10/2006

> 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: () Delete Title: (X) Change () Addition O'CONNOR, KEVIN O'CONNOR, KEVIN Name: Name:

HARBOR CIRCLE 19 HARBOR CIRCLE Address: Address: City-St-Zip: CENTERPORT, NY City-St-Zip: CENTERPORT, NY 11721

Title: VC Title: VC (X) Change () Addition () Delete Name: O'CONNOR, CHRYSE Name: O'CONNOR, CHRYSE

HARBOR CIRCLE 19 HARBOR CIRCLE Address: Address: CENTERPORT, NY CENTERPORT, NY 11721 City-St-Zip: City-St-Zip:

Title: Title: DS () Delete () Change () Addition

BARIS, CONSTANTINE Name: Name: 43 OYSTER BAY ROAD Address: Address: City-St-Zip: LOCUST VALLEY, NY 11560 City-St-Zip:

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: KEVIN O'CONNOR CEO 10/10/2006