## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000004536

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

Address:

City-St-Zip:

43 OYSTER BAY ROAD

LOCUST VALLEY, NY 11560

FILED Feb 26, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
BUILDING	F BREEZE PA D, UNIT 10 EEZE, FL 325				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
19 HARBOR CIRCLE CENTERPORT, NY 11721			BUILDING D, UNIT 10	5680 GULF BREEZE PARKWAY BUILDING D, UNIT 10 GULF BREEZE, FL 32563	
FEI Number:	20-3188270	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
BUILDING	R, KEVIN F BREEZE PA D, UNIT 10 EZE, FL 325				
	named entity of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP ( O'CONNOR, KI 19 HARBOR C CENTERPORT	RCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VC ( O'CONNOR, CI 19 HARBOR C CENTERPORT	RCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	DS ( BARIS, CONST	) Delete ANTINE	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: KEVIN O'CONNOR CP 02/26/2009