## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000004441

Entity Name: HUDSON GROUP (HG) INC.

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business:			New P	New Principal Place of Business:		
1 MEADOWLANDS PLAZA, SUITE 902 EAST RUTHERFORD, NJ 07030						
Current Mailing Address:			New Mailing Address:			
1 MEADOWLANDS PLAZA, SUITE 902 EAST RUTHERFORD, NJ 07030						
FEI Number: 26-1776066 FEI Num		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:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:						
	Electronic	Signature of Registered Agent	<u> </u>		Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () D	oelete EPH SS PLAZA, SUITE 902	Title: Name: Address City-St-2	PD DIDOMIZIO, : 1 MEADOWI	(X) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MULLANEY, MICH	S PLAZA, SUITE 902	Title: Name: Address City-St-2		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MARSHALL, JAY	S PLAZA, SUITE 902	Title: Name: Address City-St-2		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () C WOLF, WILLIAM 1 MEADOWLAND EAST RUTHERFO	S PLAZA, SUITE 902	Title: Name: Address City-St-2	:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TORRES, JUAN C	S PLAZA, SUITE 902	Title: Name: Address City-St-2		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CASE, JEFFERS	S PLAZA, SUITE 902	Title: Name: Address City-St-2		( ) 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.

SIGNATURE: JAY G. MARSHALL S 01/12/2009