

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Jan 30, 2006
Secretary of State**

DOCUMENT# N02000008647

Entity Name: HUMAN COMMUNITY SERVICES, INC.

Current Principal Place of Business:

175 NW 128 STRET
N.MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

175 N.W 128 STREET
N.MIAMI, FL 33168

New Mailing Address:

FEI Number: 02-0651459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAMAS, HUGO
175 NW 128 STREET
N.MIAMI, FL 33168 US

Name and Address of New Registered Agent:

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: HUGO DAMAS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAMAS, HUGO
Address: 175 NW 128 STREET
City-St-Zip: N.MIAMI, FL 33168

Title: SD () Delete
Name: JOSEPH, FRANCE M
Address: 9645 SW 1CT
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TD () Delete
Name: LEVEILLE, SUZETTE
Address: 175 NW 128 ST
City-St-Zip: N.MIAMI, FL 33168

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: ALCINDOR, JUDE
Address: 19600 NE MIAMI CT
City-St-Zip: MIAMI, FL 33179

Title: AD () Change (X) Addition
Name: LEVEILLE, SUZETTE
Address: 175 NW 128 ST
City-St-Zip: N MIAMI, FL 33168

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUGO DAMAS

Electronic Signature of Signing Officer or Director

D

01/30/2006

Date