2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000010185 1. Entity Name HOUSES UNLIMITED, INC.							2006 OCT 27 AM IO: 56 SECRETARY OF STATE				
Principal Place of Business 4891 NW 103RD AVENUE SUITE 11-A SUNRISE, FL-33351			Mailing Address 48 91 NW 103RD AVENU E SUITE-11-A SUNRISE, FL- 33351				AT	LLAHASS	בב,רבטו		
2. Principal Place of Business 11470 W. SAMPLE ROJA Suite, Apt. #, etc.			3. Mailing Address 11470 W. Sample Suite, Apt. #, etc.		PIE ROI	ad '	52006	REIN-P		98 (11/05)	
City & State CORAL		195, FL	CORAL SPRINGS, FL		4. FI	El Number 52	- 24537	127		plied For t Applicable	
· Zip 330		Country USA	Zip 33065	5A							
6. Name and Address of Current Registered Agent					Name	7. N	ame and	Address of New	Registered .	Agent	
POTT, BRI 2831 NOR UNIT #104 OAKLAND	TH OAKL		114	70 U	ک ، ب	ris Not Acceptab Sample	Road				
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00											
10.		OFFICERS AND	DIRECTORS	11,		ADI	DITIONS/	CHANGES TO OF	FICERS AND	DIRECTOR	3 IN 11
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STREET ADDRESS CITY-ST-ZIP	4891 NW	103RD AVENUE #11-A , FL 33351			ET ADDRESS - -ST-ZIP (11470 CORAL	W. S SPR	ample 1 1N93, F	40 es. L 334	065	
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CITY+ST-ZIP	OAKLAND PARK, FL 33309				-ST-ZIP	corn	SPR	1495, F	L 330	265	
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the color than	certify that the	rt or supplemental report is he receiver or trustee empo		STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY T the exe	-ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E ETADDRESS -ST-ZIP E ETH ADDRESS -ST-ZIP	the same I	egal effec	t as if made unde	roath; that I	Change	Addition

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