## P0500010185

(Requ	iestor's Name)	
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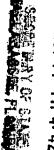
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## **COVER LETTER**

Division of Corporations
SUBJECT: HOUSES UNLIMITED, INC. (Name of Corporation)
DOCUMENT NUMBER: P0500010185
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MUSHTAR MIAN
(Name of Contact Person)
HOUSES UNLIMITED, INC. (Firm/Company)
(Firm/Company)
4851 NW 103 Ave, SUITE 44G, SUNRISE, FZ 33351 (Address)
Surveyse, FZ 33351 (City/State and Zip Code)
For further information concerning this matter, please call:
MUSHFAQ MIAN at (305) 634-5325 or (954) 773-5373  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: HOUSE'S UNLIMITED INC.
2. The principal office address: 4851 N.W. 103RD AVENUE, SUITE 44-G SUNRISE, FL 33351
SUNRISE, FL 33351
3. The mailing address (if different):
4. Date of incorporation/qualification: 1-18-05 Document number: P05000010185
<ol><li>The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)</li></ol>
MIAN, MUSHTAB
MIAN, MUSHTAB.  4851 NW 103 - Avenue, Suite 44-G,
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MOHAMMED H. ANDHA  4835 NW 96 <sup>TH</sup> Avenue,  (P.O. Box NOT acceptable)
Sunvise, FL 33351
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an parcer or director)  MUSHTAG MIAN, DIRECTOR (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Egent) (Date)
If signing on behalf of an entity:
MOHAMONED H. ANDHA. (Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *