


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2006 8:00 am
Secretary of State

05-30-2006 90036 021 ***158.75

DOCUMENT # P05000051460

1. Entity Name
 HUDSON MARKETS INC.



Principal Place of Business
 27515 KIRKWOOD CIRCLE
 WESLEY CHAPEL, FL 33543 US

Mailing Address
 27515 KIRKWOOD CIRCLE
 WESLEY CHAPEL, FL 33543 US

2. Principal Place of Business
 27750 COWDREY STREET
 Suite, Apt. #, etc.
 206

3. Mailing Address
 27750 COWDREY STREET
 Suite, Apt. #, etc.
 206

City & State
 WESLEY CHAPEL, FL

City & State
 WESLEY CHAPEL, FL


Zip
 33543

Country
 USA

Zip
 33543

Country
 USA

40094430



03042006 Chg-P CR2E034 (11/05)

4. FEI Number
 20-2680510001

Applied For
 Not Applicable

5. Certificate of Status Desired **XX** \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, RICHARD
 27515 KIRKWOOD CIRCLE
 WESLEY CHAPEL, FL 33543

7. Name and Address of New Registered Agent

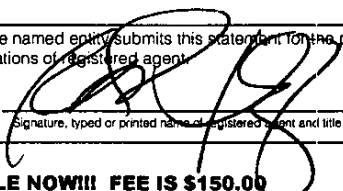
Name
 RICHARD DIAZ

Street Address (P.O. Box Number is Not Acceptable)
 27750 COWDREY STREET

APT # 206

City
 WESLEY CHAPEL FL Zip Code
 33543

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: 4/24/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIAZ, RICHARD 27515 KIRKWOOD CIRCLE WESLEY CHAPEL, FL 33543 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIAZ, RICHARD 27750 COWDREY STREET APT# 206 WESLEY CHAPEL, FL 33543 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC ORJUELA, LIZA M 27515 KIRKWOOD CIRCLE WESLEY CHAPEL, FL 33543 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC ORJUELA, LIZA M 27750 COWDREY STREET WESLEY CHAPEL, FL 33543 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 4/24/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR