

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000074234

Entity Name: HABITAT GROUP, INC.

FILED
Oct 12, 2009
Secretary of State

Current Principal Place of Business:

16909 N BAY ROAD
507
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

16909 N BAY ROAD
507
SUNNY ISLES, FL 33160

New Mailing Address:

FEI Number: 20-4962611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUQUE, JOHN
16909 N BAY ROAD
507
SUNNY ISLES, FL 33160 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: JOHN DUQUE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUQUE, JOHN
Address: 16909 N BAY ROAD #507
City-St-Zip: SUNNY ISLES, FL 33160

Title: T (X) Delete
Name: DUQUE, PABLO S
Address: 16909 N BAY ROAD 507
City-St-Zip: SUNNY ISLES, FL 33160

Title: S (X) Delete
Name: DUQUE, DANIEL F
Address: 3818 CHARLES STEWART DR
City-St-Zip: FAIR FAX VIRGINIA 22033, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN DUQUE

Electronic Signature of Signing Officer or Director

P

10/12/2009

Date