2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000132281

Entity Name: HOSTMEDICS INC.

FILED Dec 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1840 CORAL WAY
4TH FLOOR
4TH FLOOR
MIAMI, FL 33145
16393 E PLEASURE DR
LOXAHATCHEE, FL 33470

Current Mailing Address: New Mailing Address:

1840 CORAL WAY
SUITE 4-501
MIAMI, FL 33145

16393 E PLEASURE DR
LOXAHATCHEE, FL 33470

FEI Number: 22-3973486 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

DANIEL CLARK CPA
605 BELVEDERE ROAD
SUITE 6
WEST PALM BEACH, FL 33405 US

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: DANIEL CLARK 12/21/2009

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name:BROWN, BRIANName:BROWN, BRIANAddress:1840 CORAL WAY, 4TH FLOORAddress:16393 E PLEASURE DR

City-St-Zip: MIAMI, FL 33145 City-St-Zip: LOXAHATCHEE, FL 33470

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 KIMBALL, DAVID
 Name:
 KIMBALL, DAVID

 Address:
 1840 CORAL WAY, 4TH FLOOR
 Address:
 16393 E PLEASURE DR

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 LOXAHATCHEE, FL 33470

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: BRIAN C BROWN CEO 12/21/2009