

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000151695

**FILED**  
**Oct 30, 2009**  
**Secretary of State**

**Entity Name:** H S R CORPORATION

**Current Principal Place of Business:**

18334 HOMESTEAD AVE  
MIAMI, FL 33157 US

**New Principal Place of Business:**

**Current Mailing Address:**

18334 HOMESTEAD AVE  
MIAMI, FL 33157 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

AHMED, SYED J  
151 SE 8 ST.  
205  
HOMESTEAD, FL 33030 US

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

AHMED, SYED J  
18334 HOMESTEAD AVE  
MIAMI, FL 33157 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: SYED AHMED

10/30/2009

\_\_\_\_\_  
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:**

Title: PD ( ) Delete  
Name: AHMED, SYED J  
Address: 151 SE 8 ST. #205  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: VPD ( ) Delete  
Name: HOSSAIN, MOHAMMAD A  
Address: 18334 HOMESTEAD AVE  
City-St-Zip: MIAMI, FL 33157 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: AHMED, SYED J  
Address: 18334 HOMEASTEAD AVE  
City-St-Zip: MIAMI, FL 33157 US

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: SYED AHMED

P

10/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date