

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# K04142

**FILED**  
**May 05, 2011**  
**Secretary of State**

**Entity Name:** NEW HOME CENTER, INC.

**Current Principal Place of Business:**

3492 N. UNIVERSITY DRIVE  
SUNRISE, FL 33351 US

**New Principal Place of Business:**

3211 N. PINE ISLAND RD  
2ND FLOOR  
SUNRISE, FL 33351 US

**Current Mailing Address:**

3492 N. UNIVERSITY DRIVE  
SUNRISE, FL 33351 US

**New Mailing Address:**

4214 N.42ND TER  
HOLLYWOOD, FL 33021 US

**FEI Number:** 65-0038784

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAUMAN, JEROME A.  
7119 W BROWARD BLCD  
PLANTATION, FL 33317 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: BAUMAN, JEROME

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: ABOVITZ, ITTA  
Address: 4214 N. 42 TER  
City-St-Zip: HOLLYWOOD, FL 33021

Title: P  
Name: ABOVITZ, MINDY S  
Address: 4214 N 42 TERR.  
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: S  
Name: SAPERSTEIN, LAURA  
Address: 3211 N. PINE ISLAND RD  
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: ITTA ABOVITZ

VP

05/05/2011

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

\_\_\_\_\_  
Date