

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000161503

Entity Name: HOME SAVERS GROUP, INC.

FILED
Dec 03, 2009
Secretary of State

Current Principal Place of Business:

1110 BRICKELL AV
317
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1110 BRICKELL AV
317
MIAMI, FL 33131

New Mailing Address:

FEI Number: 25-1922090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIPSON, STUART A ESQ.
16900 NE 19TH AVE
N MIAMI BCH, FL 33162 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: STUART LIPSON

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: D () Delete
Name: BRAVO-CAMINO, FERNANDO
Address: 16900 NE 19TH AVE
City-St-Zip: N MIAMI BCH, FL 33162

Title: D () Delete
Name: BRAVO-CAMINO, A. NICOLAS
Address: 1110 BRICKELL AV
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FB

D

12/03/2009

Electronic Signature of Signing Officer or Director

Date