

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000152372

FILED
Feb 25, 2007
Secretary of State

Entity Name: NEW WORLD INSPECTIONS SPECIALIST, INC.

Current Principal Place of Business:

1580 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1580 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

New Mailing Address:

2601 SOUTH BAYSHORE DRIVE
700
COCONUT GROVE, FL 33133

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZASTRE, CARMEN C
1580 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

CIBRAN, ELJAIK AND LOPEZ P.L.
2601 SOUTH BAYSHORE DRIVE
700
COCONUT GROVE, FL 33133 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: SANTIAGO ELJAIK

02/25/2007

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: ZASTRE, CARMEN C
Address: 1580 SAWGRASS CORPORATE PKWY
City-St-Zip: SUNRISE, FL 33323

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAGARO, MICHAEL
Address: 2601 SOUTH BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: VP () Change (X) Addition
Name: SAGARO, CLOTILL
Address: 2601 SOUTH BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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: CLOTILL SAGARO

VP

02/25/2007

Electronic Signature of Signing Officer or Director

Date