

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000105464

**FILED**  
**Mar 05, 2009**  
**Secretary of State**

**Entity Name:** NEW VISION HOME IMPROVEMENT, INC

**Current Principal Place of Business:**

2470 LAKE DEBRA DR  
UNIT 105  
ORLANDO, FL 32835 US

**New Principal Place of Business:**

**Current Mailing Address:**

2470 LAKE DEBRA DR  
UNIT 105  
ORLANDO, FL 32835 US

**New Mailing Address:**

**FEI Number:** 06-1825127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LARSON ACCOUNTING & CONSULTING SV LLC  
8818 COMMODITY CIRCLE  
SUITE 40  
ORLANDO, FL 32819 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:** CAROLINE LARSON

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:** CUNHA, LEANDRO S  
**Address:** 2470 LAKE DEBRA DR UNIT 105  
**City-St-Zip:** ORLANDO, FL 32835 US

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

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

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** VP ( ) Change (X) Addition  
**Name:** CABO, RICARDO  
**Address:** 2470 LAKE DEBRA DR UNIT 105  
**City-St-Zip:** ORLANDO, FL 32835

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:** LEANDRO CUNHA

P

03/05/2009

Electronic Signature of Signing Officer or Director

Date