

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000088238

Entity Name: NEW REMODELING, INC.

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9858 GLADES RD  
D3-209  
BOCA RATON, FL 33434

**New Principal Place of Business:**

5432 ADAMS RD  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

9858 GLADES RD  
D3-209  
BOCA RATON, FL 33434

**New Mailing Address:**

5432 ADAMS RD  
DELRAY BEACH, FL 33484

FEI Number: 27-3769263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASTILLO, MYRNA C  
9858 GLADES RD  
D3-209  
BOCA RATON, FL 33434 US

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

CASTILLO, MYRNA C  
5432 ADAMS RD  
DELRAY BEACH, FL 33484 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: MYRNA C CASTILLO

04/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: CASTILLO, MYRNA C  
Address: 5432 ADAMS RD  
City-St-Zip: DELRAY BEACH, FL 33484

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: MYRNA C CASTILLO

PST

04/19/2011

Electronic Signature of Signing Officer or Director

Date