


# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

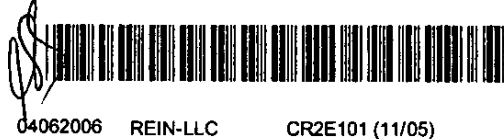
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DOCUMENT # L04000073824	
1. Entity Name MAZAL INVESTMENTS, L.L.C.	

Principal Place of Business TURNBERRY PLAZA, SUITE 801 2875 N.E. 191ST STREET AVENTURA, FL 33180	Mailing Address TURNBERRY PLAZA, SUITE 801 2875 N.E. 191ST STREET AVENTURA, FL 33180
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2. Principal Place of Business 16375 NE 18TH AVE Suite, Apt. #, etc. 322	3. Mailing Address 16375 NE 18TH AVE. Suite, Apt. #, etc. 322
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City & State N. MIAMI BEACH FL	City & State N. MIAMI BEACH FL
Zip 33162	Zip 33162
Country U.S.	Country U.S.



04062006 REIN-LLC CR2E101 (11/05)

6. Name and Address of Current Registered Agent SERBER, DANIEL J ESQ TURNBERRY PLAZA, SUITE 801 2875 N.E. 191ST STREET AVENTURA, FL 33180	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$100.00</b>	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
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100076017751  
06/09/06-01039-008 \*\*105.00  
**REINSTATEMENT** 05-06

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: C. R. Z. Date: 04/06/06 305-305-7982  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #