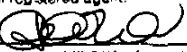


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P00000065457					FILED 06 NOV 13 PM 2: 25 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Entry Name OJALA INVESTMENTS, INC.						
Principal Place of Business 1 SOUTH OCEAN BLVD. LAKE WORTH, FL 33460		Mailing Address 1 SOUTH OCEAN BLVD. LAKE WORTH, FL 33460				
2. Principal Place of Business		3. Mailing Address		 11072006 REIN-P CRZE098 (11/05) 06		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country			
4. FEI Number 65-1021653				Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
LARA, GRACIELA J 1 SOUTH OCEAN BLVD. LAKE WORTH, FL 33460				Name		
				Street Address (P.O. Box Number is Not Acceptable)		
				City		
				FL Zip Code		
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: 				DATE: 11/07/06		
Signature typed or printed name of registered agent and title if applicable				NOTE: Registered Agents signature required when reinstating		
FILE NOW! FEE is \$150.00 After January 1, 2007, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	TITLE	NAME	STREET ADDRESS
	COORD	1 SOUTH OCEAN BLVD.	LAKE WORTH, FL 33460			
	LARA, JOSE J	1 SOUTH OCEAN BLVD.	LAKE WORTH, FL 33460			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: 				DATE: 11/07/06 (582-4789)		
Signature typed or printed name of signing officer or director				Date		