2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000107364

DIAZ, FRANKLIN O

6558 SPRING MEADOW DR

WEST PALM BEACH, FL 33413

Name:

Address:

City-St-Zip:

Entity Name: HEAVEN INVESTMENTS, INC.

FILED Oct 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2070 S MILITARY TRAIL STE 105 W PALM CH, FL 33415 **Current Mailing Address: New Mailing Address:** 2070 S MILITARY TRAIL STE 105 W PALM CH, FL 33415 FEI Number: 52-2380062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRITO-DIAZ, LOYDA 6558 SPRING MEADOW DR WEST PALM BEACH, FL 33413 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: LOYDA M BRITO-DIAZ Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BRITO-DIAZ, LOYDA M Name: Name: 6558 SPRING MEADOW DR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BRITO, ARGENTINA Name: 6550 SPRING MEADOW DR Address: Address: WEST PALM BEACH, FL 33413 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition MONTAS, JOSE M Name: Name: 6550 SPRING MEADOW DR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LOYDA M BRITO-DIAZ D 10/13/2006