

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000105738

Entity Name: NATHALIE OHANA, P.A.

FILED
May 23, 2007
Secretary of State

Current Principal Place of Business:

21150 POINT PLACE
#1005
AVENTURA, FL 33180

New Principal Place of Business:

3600 MYSTIC POINTE DRIVE
SUITE 1712
AVENTURA, FL 33180

Current Mailing Address:

21150 POINT PLACE
#1005
AVENTURA, FL 33180

New Mailing Address:

3600 MYSTIC POINTE DRIVE
SUITE 1712
AVENTURA, FL 33180

FEI Number: 20-3249562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OHANA, NATHALIE
21150 POINT PLACE
#1005
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

SILVA'S ENTERPRISE, INC.
5220 S UNIVERSITY DR
SUITE C-102
DAVIE, FL 33328 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: FERNANDO SILVA

05/23/2007

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/D () Delete
Name: OHANA, NATHALIE
Address: 21150 POINT PLACE #1005
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OHANA, NATHALIE
Address: 3600 MYSTIC POINTE DRIVE SUITE 1712
City-St-Zip: AVENTURA, FL 33180

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: NATHALIE OHANA

PD

05/23/2007

Electronic Signature of Signing Officer or Director

Date