2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 20, 2006
Secretary of State

DOCUMENT# P98000099893

Entity Name: ALOHA ENTERPRISES, INC.

Current Principal Place of Business:

1421 SOUTH OCEAN DRIVE
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

1421 SOUTH OCEAN DRIVE
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 65-0880396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASCOLO, WAYNE A
1421 SOUTH OCEAN DRIVE
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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: WAYNE A MASCOLO
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: DPT ( ) Delete
Name: MASCOLO, WAYNE
Address: 1421 SOUTH OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DV ( ) Delete
Name: MASCOLO, MARILYN
Address: 1421 SOUTH OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DVS (X) Delete
Name: MASCOLO, WENDY
Address: 1421 SOUTH OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DV (X) Delete
Name: MASCOLO, DONNA
Address: 1811 HIGHWAY AIA UNIT 2401
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: MASCOLO, WAYNE A
Address: 1421 SOUTH OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DVS (X) Change ( ) Addition
Name: MASCOLO, WENDY
Address: 1421 SOUTH OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: WAYNE A MASCOLO DPT 12/20/2006
Electronic Signature of Signing Officer or Director Date