

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000215

FILED  
Jul 16, 2008  
Secretary of State

Entity Name: NREFSI INC.

**Current Principal Place of Business:**

4703 CLIFTON PARK DR  
JAMESTOWN, NC 27282

**New Principal Place of Business:**

**Current Mailing Address:**

4703 CLIFTON PARK DR  
JAMESTOWN, NC 27282

**New Mailing Address:**

1184 FISCHER BLVD SUITE 1C  
TOMS RIVER, NJ 08753 US

FEI Number: 11-3738176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANBORN, RACHELLE  
5900 SW 96TH ST  
MIAMI, FL 33156 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: \_\_\_\_\_

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 ( ) Delete  
Name: MIRANDA, JOSAPH  
Address: 10 PEARL DR  
City-St-Zip: TOMS RIVER, NJ 08753

Title: VS ( ) Delete  
Name: HICKS, RONALD  
Address: 4703 CLIFTON PARK DR  
City-St-Zip: JAMESTOWN, NC 27282

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR (X) Change ( ) Addition  
Name: MIRANDA, JOSEPH  
Address: 10 PEARL DR  
City-St-Zip: TOMS RIVER, NJ 08753

Title: MR (X) Change ( ) Addition  
Name: HICKS, RONALD  
Address: 4703 CLIFTON PARK DR  
City-St-Zip: JAMESTOWN, NC 27282

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: JOSEPH MIRANDA

MR

07/16/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date