2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062386

City-St-Zip:

SUNNY ISLES BEACH, FL 33160

FILED Apr 28, 2009 Secretary of State

Entity Nar	me: NAECO F	PROPERTIES, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
19111-COLLINS AVENUE 2303 SUNNY ISLES BEACH, FL 33160						
Current Mailing Address:				New Mailing Address:		
1428 BRICKELL AVE. SUITE 206 MIAMI, FL 33172				C/O BLUMA GRANIK, 2500 PARKVIEW DR. #1818 HALLANDALE BEACH, FL 33009		
FEI Number:	65-1126704	FEI Number Applied For ()	FEI Num	ber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
FIGUEROA, JUAN CPA 1428 BRICKELL AVE. SUITE 206 MIAMI, FL 33131 US The above named entity submits this statement for the purpose of				BLUMA, GRANIK 2500 PARKVIEW DR #1818 HALLANDALE BEACH, FL 33009 US		
	of Florida.	submits this statement for the	e pui pose oi	changing its register	ed office of registered agent, or both,	
SIGNATURE: BLUMA GRANIK				04/28/2009		
Electronic Signature of Registered Agent					Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	TUACHI, ABRAH 19111-COLLINS	Delete HAM S AVENUE APT 2303 BEACH, FL 33160		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TUACHI, ISAAC 19111-COLLINS	Delete S AVENUE APT 2303 BEACH, FL 33160		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TUACHI, MOISE	Delete S S AVENUE APT 2303		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ABRAHAM TUACHI D 04/28/2009