## 2007 FOR PROFIT CORPORATION

STREET ADDRESS CITY-ST-ZIP

## **FILED** ANNUAL REPORT Jan 31, 2007 08:00 AM **DOCUMENT # P04000127753 Secretary of State** 1. Entity Name NLJ BUILDERS INC Principal Place of Business Mailing Address 820 AZALEA CT 820 AZALEA CT PLANTATION, FL 33317 PLANTATION, FL 33317 US No Chg-P CR2E034 (11/05) 01192007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-3726716 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LEVY, NOEL DO NOT WRITE 820 AZALEA CT PLANTATION, FL 33317 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME LEVY, NOEL 000000613572 02/05/07-80042-020 150.00 STREET ADDRESS 820 AZALEA CT PLANTATION, FL 33317 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trusfee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 1-29-07

Daytime Phone #

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR