2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073425

City-St-Zip:

NEWPORT BEACH, CA 92660

FILED Apr 18, 2006 Secretary of State

Entity Name: NJL PROPERTIES, INC **Current Principal Place of Business: New Principal Place of Business:** P O BOX 2792 VERO BEACH, FL 32961 **Current Mailing Address: New Mailing Address:** P O BOX 2792 VERO BEACH, FL 32961 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FORTE, PETER F 1837 23RD AVE VERO BEACH, FL 32960 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition

KORS, RICHARD J KORS, RICHARD J Name: Name: 537 NEWPORT CENTER DR - # 605 537 NEWPORT CENTER DR - # 605 Address: Address: City-St-Zip: NEWPORT BEACH, CA 92660 City-St-Zip: NEWPORT BEACH, CA 92660 Title: VPTD Title: (X) Change () Addition () Delete RILEY, JOHN F Name: RILEY, JOHN F Name: 537 NEWPORT CENTER DR - # 605 537 NEWPORT CENTER DR - # 605 Address: Address: NEWPORT BEACH, CA 92660 NEWPORT BEACH, CA 92660 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: SD SD GUALTIERI, SAL G.M. F GUALTIERI, SAL G.M. F Name: Name: 537 NEWPORT CENTER DR - # 605 5410 NW 3RD TERRACE Address: Address:

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.

City-St-Zip:

BOCA RATON, CA 33482

SIGNATURE: JOHN F RILEY PTD 04/18/2006