## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000073425

City-St-Zip:

BOCA RATON, CA 33482

FILED Aug 29, 2007 Secretary of State

Entity Nar	me: NJL PRC	PERTIES, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
P O BOX 2792 VERO BEACH, FL 32961			#6	537 NEWPORT CENTER DRIVE #605 NEWPORT BEACH, CA 92660			
Current Mailing Address:				New Mailing Address:			
P O BOX 2 VERO BEA	2792 ACH, FL 3296	1					
FEI Number:		FEI Number Applied For ( )	FEI Numbe	ımber Not Applicable (X)		Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
The above	O AVE ACH, FL 3296 named entity	0 US submits this statement for the	purpose of c	hanging it	s registered	office or registe	ered agent, or both,
	e of Florida.						
SIGNATURE: Electronic Signature of Registered Agent				 Date			
Election Car	ce with s. 607.19	3(2)(b), F.S., the corporation did n g Trust Fund Contribution().	ot receive the				S AND DIRECTORS:
Title: Name: Address: City-St-Zip:	KORS, RICHAI 537 NEWPOR	) Delete RD J I CENTER DR - # 605 ACH, CA 92660	Na Ad	tle: ame: ddress: ity-St-Zip:	KORS, RICHA	2725 LEGACY DR	
Title: Name: Address: City-St-Zip:	RILEY, JOHN F 537 NEWPOR	) Delete = r CENTER DR - # 605 ACH, CA 92660	Na Ad	tle: ame: ddress: ity-St-Zip:	PTD ( RILEY, JOHN 26355 PALM MURRIETA, C	TREE LANE	dition
Title: Name: Address:	SD ( GUALTIERI, SA 5410 NW 3RD		Na	tle: ame: ddress:	(	) Change ( ) Add	lition

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: JOHN F. RILEY PTD 08/29/2007