

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 09, 2007 08:00 AM
Secretary of State**

DOCUMENT # P05000124027

1. Entity Name
NJE PROPERTIES, INC.



Principal Place of Business
12804 VILLAGE BLVD
MADEIRA BEACH, FL 33708

Mailing Address
C/O S. KRAFT P.A.
934 N. UNIVERSITY DR #250
CORAL SPRINGS, FL 33071 US



01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3454361

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

HAMUY, NAOMI
10150 VESTAL CT
CORAL SPRINGS, FL 33071

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME HAMUY, NEIL
STREET ADDRESS 9629 PARK VIEW AVENUE
CITY-ST-ZIP BOCA RATON, FL 33428

TITLE PD
NAME HAMUY, NAOMI
STREET ADDRESS 10150 VESTAL CT
CITY-ST-ZIP POMPANO BEACH, FL 33071

TITLE
NAME
STREET ADDRESS
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01/10/07-80031-001 150.00

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IN THIS SPACE**

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 trustee 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #