

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000124027

Entity Name: NJE PROPERTIES, INC.

FILED  
Jan 07, 2009  
Secretary of State

## Current Principal Place of Business:

12804 VILLAGE BLVD  
MADEIRA BEACH, FL 33708

## New Principal Place of Business:

## Current Mailing Address:

C/O HAMUY  
PO BOX 8850  
CORAL SPRINGS, FL 33075

## New Mailing Address:

FEI Number: 20-3454361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAMUY, BENJAMIN  
10150 VESTAL CT  
CORAL SPRINGS, FL 33071 US

## Name and Address of New Registered Agent:

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:

Title: D ( ) Delete  
Name: HAMUY, NEIL  
Address: 9629 PARK VIEW AVENUE  
City-St-Zip: BOCA RATON, FL 33428

Title: PD ( ) Delete  
Name: HAMUY, NAOMI  
Address: 10150 VESTAL CT  
City-St-Zip: POMPANO BEACH, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: NAOMI HAMUY

PRES

01/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date