
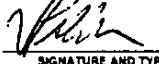


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 02, 2008 8:00 am
Secretary of State

04-21-2008 90054 020 ***150.00

DOCUMENT # P07000060812 1. Entity Name VJRE PROPERTIES, INC.					
Principal Place of Business 251 SW 10TH COURT POMPANO BEACH FL 33060 US			Mailing Address 251 SW 10TH COURT POMPANO BEACH FL 33060 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent ALLEN, CHARLES 251 SW 10TH COURT POMPANO BEACH FL 33060				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
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 _____ <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-electing)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PULLA, VINCENTO <input type="checkbox"/> Delete 555 STEEPROCK DRIVE DOWNSVIEW ON M3J-2-Z6		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TABONE, RITA <input type="checkbox"/> Delete 555 STEEPROCK DRIVE DOWNSVIEW ON M3J-2-Z6		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD PULLA, JOSEPH <input type="checkbox"/> Delete 555 STEEPROCK DRIVE DOWNSVIEW ON M3J-2-Z6		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PULLA, JOSEPH <input type="checkbox"/> Delete 1701-A BLOUNT ROAD POMPANO BEACH FL 33069		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  Vince Pulla <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4-7-08 4166366146 <small>Date Day: no Phone #</small>		

66012868

1st MOORE CR2E034 (10/07)

4. FEI Number **74-3216033** Applied For Not Applicable

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