

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000104728

FILED
Apr 30, 2007
Secretary of State

Entity Name: N.E.R.I. REAL ESTATE INVESTMENTS, INC.

Current Principal Place of Business:

375 N.E. 54TH STREET
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

1859 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34953

New Mailing Address:

1855 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952

FEI Number: 65-0958544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPOLEON, ELIMA
375 N.E. 54TH STREET
MIAMI, FL 33137 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: NAPOLEAN, ELIMA
Address: 375 N.E. 54TH STREET#8
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: NAPOLEAN, ODETTE
Address: 375 N.E. 54TH STREET#8
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: ALTIDOR, MARJORIE
Address: 5475 NE ST JAMES DR #153
City-St-Zip: PORT ST LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NAPOLEON, ELIMA
Address: 375 N.E. 54TH STREET#8
City-St-Zip: MIAMI, FL 33137

Title: D (X) Change () Addition
Name: NAPOLEON, ODETTE
Address: 375 N.E. 54TH STREET#8
City-St-Zip: MIAMI, FL 33137

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: ELIMA NAPOLEON

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date