2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2009
Secretary of State

DOCUMENT# P99000030515

Entity Name: VCJ PROPERTIES, INC.

Current Principal Place of Business:

5531 N UNIVERSITY DR
103
POMPANO BEACH, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

BOX 26060
TAMARAC, FL 33320

New Mailing Address:

FEI Number: 65-0926087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORCHIN, DAVID CPA
8511 WEST BROWARD BLVD
SUITE 200
PLANTATION, FL 33324 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: PULLA, JOSEPH
Address: 1701-A BLOUNT RD.
City-St-Zip: POMPANO BEACH, FL 33069

Title: VPSD ( ) Delete
Name: PULLA, JOSEPH
Address: 555 STEEPROCK DRIVE
City-St-Zip: DOWNSVIEW, ONTARIO, CA M3J 2Z6

Title: TD ( ) Delete
Name: TABONE, RITA
Address: 555 STEEPROCK DRIVE
City-St-Zip: DOWNSVIEW, ONTARIO, CA M3J 2Z6

Title: PD ( ) Delete
Name: PULLA, VINCENZO
Address: 555 STEEPROCK DR
City-St-Zip: DOWNSVIEW, ONTARIO, CANADA, M3J 2Z6

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: VINCE PULLA PD 02/03/2009

Electronic Signature of Signing Officer or Director Date