## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S03292

Entity Name: NJ PRESSURE-PLUS, INC

FILED Apr 06, 2006 Secretary of State

		NET 200, IIVO.			
Current Principal Place of Business:			New Principal Place	of Business:	
1717 SW 1 SUITE 11					
DEERFIEL	D BEACH, FL 33	3441 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1717 SW 1ST WAY				4177 JUNIPER TERRACE	
SUITE 11 DEERFIELD BEACH, FL 33441 US		3441 US	BOYNTON BEACH, FL 33436 US		
FEI Number:		FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	f New Registered Agent:	
937 GREÉ BOYNTON			urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Age	nt	Date	
Election Can	npaign Financing Tr	rust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () De HEINKEL, THEODO 4177 JUNIPER TEI BOYTON BEACH, I	DRE S R	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPO () De CARLETON, EDAW 861 PETUNA DR PLANTATION, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () De HEINKEL, KIMBER 4177 JUNIPER TEI BOYNTON BEACH	RLY A RRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CFO () De HUGHES, NANCY V 937 GREENBRIAR BOYNTON BEACH	J ∶DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	CEO ()De	elete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KIMBERLY A. HEINKEL ST 04/06/2006

HUGHES, ROBERT N

937 GREENBRIAR DR.

BOYNTON BEACH, FL 33435

Name:

Address:

City-St-Zip: