


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000041766 1. Entity Name IJALBA REAL ESTATE, INC.	
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Principal Place of Business 64 HAZELWOOD AVENUE LIVINGSTON, NJ 07039	Mailing Address 64 HAZELWOOD AVENUE LIVINGSTON, NJ 07039
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DO NOT WRITE IN THIS SPACE



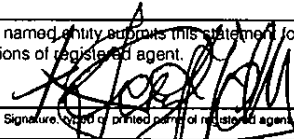
07282008 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0081831	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent IJALBA, JESUS 12924 BANYAN ROAD KEYSTONE POINT N. MIAMI, FL 33191	DO NOT WRITE IN THIS SPACE
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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:  DATE: 07/28/08

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW! FEE IS \$550.00
Due by September 12, 2008

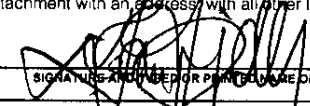
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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000000956884
 08/01/08-80004-007 550.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P IJAIBA, JESUS 64 HAZELWOOD AVENUE LIVINGSTON, NJ 07039
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  DATE: 07/28/08

SIGNATURE AND NAME OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #