

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90117 009 \*\*\*150.00

<b>DOCUMENT # P04000031844</b> 1. Entity Name <b>NOBLE RESORTS CORPORATION</b>					
Principal Place of Business <b>3015 N OCEAN BLVD SUITE 121 FORT LAUDERDALE, FL 33308</b>			Mailing Address <b>3015 N OCEAN BLVD SUITE 121 FORT LAUDERDALE, FL 33308</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country			
4. FEI Number <b>80-0741099</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BLODIG, GREGORY J ESQ GREENSPOON MARDER HIRSCHFELD ET AL. 100 W CYRPRESS CREEK ROAD SUITE 700 FORT LAUDERDALE, FL 33309</b>			7. Name and Address of New Registered Agent Name <b>Rebecca A. Foster</b> Street Address (P.O. Box Number is Not Acceptable) <b>3015 N Ocean Blvd, Ste 121</b> City <b>Ft. Lauderdale</b> <b>FL</b> Zip Code <b>33308</b>		
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE  </div> <div style="width: 40%; text-align: right;"> <b>Rebecca A Foster      4/29/05</b> </div> <div style="width: 20%; text-align: right;"> <small>DATE</small> </div> </div> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>FOSTER, REBECCA A</b> <b>3015 N OCEAN BLVD SUITE 121</b> <b>FORT LAUDERDALE, FL 33308</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>P/S/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>OTTINO, J.P. III</b> <b>3015 N OCEAN BLVD SUITE 121</b> <b>FORT LAUDERDALE, FL 33308</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>V/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>D</b> <b>LANDAU, MARC J</b> <b>3015 N OCEAN BLVD SUITE 121</b> <b>FORT LAUDERDALE, FL 33308</b>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<b>V/T/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Delete	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:			<b>Rebecca A Foster      4/29/05      954.563.2444</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date      Daytime Phone #</small>		