

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054294

Entity Name: NOBLE FINANCIAL CORP

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

2701 NW BOCA RATON BLVD SUITE 207
SUITE 215
BOCA RATON, FL 33431 US

Current Mailing Address:

2701 NW BOCA RATON BLVD SUITE 207
SUITE 215
BOCA RATON, FL 33431 US

FEI Number: 20-2686073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

2701 NW BOCA RATON BLVD
SUITE 215
BOCA RATON, FL 33431 US

New Mailing Address:

2701 NW BOCA RATON BLVD
SUITE 215
BOCA RATON, FL 33431 US

Name and Address of Current Registered Agent:

COHEN, MATTHEW
2701 NW BOCA RATON BLVD
SUITE 215
BOCA RATON, FL 33431 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: P, D () Delete
Name: COHEN, MATTHEW
Address: 5284 DEAUVILLE CIRCLE
City-St-Zip: BOCA RATON, FL 33496 US

Title: T, D () Delete
Name: COHEN, HELAINE
Address: 5284 DEAUVILLE CIRCLE
City-St-Zip: BOCA RATON, FL 33496 US

Title: D () Delete
Name: COHEN, BARRY
Address: 5284 DEAUVILLE CIRCLE
City-St-Zip: BOCA RATON, FL 33496 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: COHEN, MATTHEW
Address: 19276 NATURES VIEW COURT
City-St-Zip: BOCA RATON, FL 33498 US

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: MATTHEW COHEN

P, D

01/04/2008

Electronic Signature of Signing Officer or Director

Date