2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2008
Secretary of State

DOCUMENT# P06000142195

Entity Name: NOCHE, INC.

Current Principal Place of Business:

2716 NE 32 ST
UNIT 1
FORT LAUDERDALE, FL 33306

New Principal Place of Business:

2691 NE 59 STREET
UNIT 4
FORT LAUDERDALE, FL 33308

Current Mailing Address:

2716 NE 32 ST
UNIT 1
FORT LAUDERDALE, FL 33306

New Mailing Address:

3032 E. COMMERCIAL BLVD
#37
FORT LAUDERDALE, FL 33308

FEI Number: 20-5865926 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIRAN C. HERNDON, PA
8418 S US HWY 1
LAKES PLAZA
PORT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

CLAUDIA K MAZARIEGOS
2691 NE 59 STREET
UNIT 4
FORT LAUDERDALE, FL 33308 US

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: CLAUDIA MAZARIEGOS 01/21/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WENNER, GORDON
Address: 2716 NE 32 ST UNIT 1
City-St-Zip: FT LAUDERDALE, FL 33306

Title: DVP ( ) Delete
Name: MAZARIEGOS, CLAUDIA
Address: 2716 NE 32 ST UNIT 1
City-St-Zip: FT LAUDERDALE, FL 33306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: WENNER, GORDON
Address: 2691 NE 59 STREET UNIT 4
City-St-Zip: FT LAUDERDALE, FL 33308

Title: DVP (X) Change ( ) Addition
Name: MAZARIEGOS, CLAUDIA K
Address: 2691 NE 59 STREET UNIT 4
City-St-Zip: FT LAUDERDALE, FL 33308

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: CLAUDIA K MAZARIEGOS DVP 01/21/2008
Electronic Signature of Signing Officer or Director Date