

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96516

FILED
Apr 29, 2008
Secretary of State

Entity Name: NOAH INDUSTRIAL CONSTRUCTION, INC.

Current Principal Place of Business:

3811 W SLIGH AVE
TAMPA, FL 33614 US

New Principal Place of Business:

3819 W SLIGH AVE
TAMPA, FL 33614 US

Current Mailing Address:

3811 W SLIGH AVE
TAMPA, FL 33614 US

New Mailing Address:

3819 W SLIGH AVE
TAMPA, FL 33614 US

FEI Number: 59-2219063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOAH, MIKE
3401 MCFARLAND ROAD
TAMPA, FL 33618 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 () Delete
Name: NOAH, MIKE
Address: 3401 MCFARLAND ROAD
City-St-Zip: TAMPA, FL 33618

Title: ST () Delete
Name: NOAH, ANDREA
Address: 3401 MCFARLAND RD
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MIKE NOAH

P

04/29/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date