

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062810

Entity Name: NOBEL SALES LLC

FILED
Apr 18, 2009
Secretary of State

Current Principal Place of Business:

9320 N. W. 43RD STREET
FT. LASUDERDALE, FL 33351 US

New Principal Place of Business:

9320 N. W. 43RD STREET
SUNRISE, FL 33351 US

Current Mailing Address:

9320 N. W. 43RD STREET
FT. LASUDERDALE, FL 33351 US

New Mailing Address:

9320 N. W. 43RD STREET
SUNRISE, FL 33351 US

FEI Number: 26-2953422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOKES, NIKKI E
9320 N. W. 43RD STREET
FT. LAUDERDALE, FL 33351 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

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: SWINNEY, MARCUS T
Address: 9320 N. W. 43RD STREET
City-St-Zip: FT. LAUDERDALE, FL 33351 US

Title: TREA () Delete
Name: STOKES, NIKKI E
Address: 9320 N. W. 43RD STREET
City-St-Zip: FT. LAUDERDALE, FL 33351 US

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: SWINNEY, MARCUS T
Address: 9320 N. W. 43RD STREET
City-St-Zip: SUNRISE, FL 33351 US

Title: TREA (X) Change () Addition
Name: STOKES, NIKKI E
Address: 9320 N. W. 43RD STREET
City-St-Zip: SUNRISE, FL 33351 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NIKKI E. STOKES

TREA

04/18/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date