2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000002465

1. Entity Name
THE NOBLE ART OF SABRAGE CHAMPAGNE SOCIETY INC.

Principal Place of Business	Mailing Address
6230 N.W. 23 ST. BOCA RATON, FL 33434	6230 N.W. 23 ST. BOCA RATON, FL 33434

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04172006 No Chg-NP CR2E037 (11/05)

4. FEI Number
02-0612516
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GIBERT, EVA
6230 N.W. 23 ST.
BOCA RATON, FL 33434

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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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GIBERT, EVA
STREET ADDRESS	6230 N.W. 23 ST.
CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE	D
NAME	NUGENT, RONALD
STREET ADDRESS	6230 N.W. 23 ST.
CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE	D
NAME	SHEIKH, SUSAN E
STREET ADDRESS	6230 N.W. 23 ST.
CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/04/06-80002-021 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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: Eva Gibert 04-17-2006 561-470-0541
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #