

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012091

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: NOULA, INCORPORATED

**Current Principal Place of Business:**

21 SOUTH KROME AVENUE  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

21 SOUTH KROME AVENUE  
HOMESTEAD, FL 33030

**New Mailing Address:**

FEI Number: 11-3831034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GLADNEY, NATASHA B  
14325 SW 268TH TERRACE  
NARANJA, FL 33032 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

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: LINDOR, JEAN MARI  
Address: 21 SOUTH KROME AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

Title: VPVC ( ) Delete  
Name: GLADNEY, NATASHA B  
Address: 14325 SW 268TH TERRACE  
City-St-Zip: NARANJA, FL 33032

Title: D ( ) Delete  
Name: GLADNEY, NATASHA B  
Address: 14325 SW 268TH TERRACE  
City-St-Zip: NARANJA, FL 33032

Title: SD ( ) Delete  
Name: FLEURAN, FREDA  
Address: 74 NW 4TH STREET  
City-St-Zip: HOMESTEAD, FL 33030

Title: TD ( ) Delete  
Name: JEAN-BAPTISTE, NADEGE  
Address: 523 NORTHWEST 5TH AVENUE #517  
City-St-Zip: FLORIDA CITY, FL 33034

Title: D ( ) Delete  
Name: JEAN-BAPTISTE, HAROLD  
Address: 13100 NE 4TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN MARI LINDOR

PCD

04/22/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date