## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000012091

Entity Name: NOULA, INCORPORATED

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
21 SOUTH KROME AVENUE HOMESTEAD, FL 33030				21 SOUTH KROME AVENUE HOMESTEAD, FL 33030 US			
Current Mailing Address:				New Mailing Address:			
21 SOUTH KROME AVENUE HOMESTEAD, FL 33030				21 SOUTH KROME AVENUE HOMESTEAD, FL 33030 US			
FEI Number:	11-3831034	FEI Number Applied For ( )	FEI Num	ber Not Appli	icable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
GLADNEY, NATASHA B 14325 SW 268TH TERRACE NARANJA, FL 33032 US				GLADNEY, NATASHA B 13993 SW 280TH TERRACE HOMESTEAD, FL 33030 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: NATASHA BEAUBRUN GLADNEY				03/19/2009			
Electronic Signature of Registered Agent						Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PCD () LINDOR, JEAN I 21 SOUTH KRO HOMESTEAD, F	ME AVENUE		Title: Name: Address: City-St-Zip:	()C	hange ()Addition	
Title: Name: Address: City-St-Zip:	VPVC () GLADNEY, NATA 14325 SW 268T NARANJA, FL 3	H TERRACE		Title: Name: Address: City-St-Zip:	()C	hange()Addition	
Title: Name: Address: City-St-Zip:	D () GLADNEY, NATA 14325 SW 268T NARANJA, FL 3	H TERRACE		Title: Name: Address: City-St-Zip:	D (X) C GLADNEY, NATAS 13993 SW 280TH HOMESTEAD, FL	ITERRACE	
Title: Name: Address: City-St-Zip:	SD () FLEURAN, FREI 74 NW 4TH STR HOMESTEAD, F	EET		Title: Name: Address: City-St-Zip:	()C	hange()Addition	
Title: Name: Address: City-St-Zip:	JEAN-BAPTISTE	ST 5TH AVENUE #517		Title: Name: Address: City-St-Zip:	()C	hange()Addition	
Title: Name: Address: City-St-Zip:	D () JEAN-BAPTISTE 13100 NE 4TH S NORTH MIAMI, I	TREET		Title: Name: Address: City-St-Zip:	()C	hange()Addition	

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 03/19/2009