

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108158

Entity Name: NOAG, INC.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

2000 N.E. 135TH ST #604  
N. MIAMI, FL 33181

## New Principal Place of Business:

1050 95 ST #6  
MIAMI, FL 33154

## Current Mailing Address:

2000 N.E. 135TH ST #604  
N. MIAMI, FL 33181

## New Mailing Address:

1050 95 ST #6  
MIAMI, FL 33154

FEI Number: 51-0430836

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA, AGUSTINA  
2000 NE 135 ST.  
#604  
N. MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

GARCIA, AGUSTINA  
1050 95 ST  
#6  
MIAMI, FL 33154 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: AGUSTINA GARCIA

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GARCIA, AGUSTINA  
Address: 2000 NE 135 ST, #604  
City-St-Zip: N. MIAMI, FL 33181

Title: DV ( ) Delete  
Name: GARCIA O, AGUSTINA A  
Address: 2000 N.E. 135TH ST #604  
City-St-Zip: N. MIAMI, FL 33181

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GARCIA, AGUSTINA  
Address: 1050 95 ST #6  
City-St-Zip: MIAMI, FL 33154 US

Title: V (X) Change ( ) Addition  
Name: BARBOTO, NORA  
Address: 1065 94 ST #302  
City-St-Zip: MIAMI, FL 33154 US

Title: S ( ) Change (X) Addition  
Name: LAMAS, VIVIANA  
Address: 1065 94 ST #302  
City-St-Zip: MIAMI, FL 33154 US

Title: D ( ) Change (X) Addition  
Name: GARCIA, FROILAN  
Address: 1065 94 ST # 302  
City-St-Zip: MIAMI, FL 33154 US

I hereby certify that the information supplied with this filing does not qualify for the 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: AGUSTINA GARCIA

P

04/19/2006

Electronic Signature of Signing Officer or Director

Date