2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000155380

Entity Name: NOC ARCHITECTURE INC.

FILED Nov 10, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4101 PINE TREE DRIVE 1012

MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

4101 PINE TREE DRIVE 10851 LAKE WYNDS COURT 1012 BOYNTON BEACH, FL 33437 MIAMI BEACH, FL 33140

FEI Number: 36-1114420 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPINDEL, JONATHAN J PHD, SC 4101 PINE TREE DRIVE 1012 MIAMI BEACH, FL 33140 US SPINDEL, JONATHAN J PHD, SC 10851 LAKE WYNDS COURT BOYNTON BEACH, FL 33437 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: DR. JONATHAN SPINDEL 11/10/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

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

Title: P () Delete Title: () Change () Addition

 Name:
 JONATHAN, SPINDEL PHD, SC
 Name:

 Address:
 4101 PINE TREE DRIVE
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 DOREEN, KOHN
 Name:
 DOREEN, SPINDEL

 Address:
 619 INGRAM AVE
 Address:
 619 INGRAM AVE

City-St-Zip: STATEN ISLAND, NY 10314 City-St-Zip: STATEN ISLAND, NY 10314

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JONATHAN J. SPINDEL, PHD, SC P 11/10/2004