## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000002581

Entity Name: NOEL LISA CORP.

FILED Jul 24, 2006 Secretary of State

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

9445 SW 146 CT. 15053 SW 109 LANE MIAMI, FL 33196 US MIAMI, FL 33186 US

**Current Mailing Address: New Mailing Address:** 

9445 SW 146 CT. 15053 SW 109 LANE MIAMI, FL 33186 US MIAMI, FL 33196 US

FEI Number: 83-0380675 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:

LYN, LISA LYN, LISA 15053 SW 109 LANE 9445 SW 146 CT. MIAMI, FL 33186 US MIAMI, FL 33196

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: LISA LYN 07/24/2006

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

Name: LYN, LISA Name: LYN, LISA 9445 SW 146 CT. Address: 15053 SW 109 LANE Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: MIAMI, FL 33196 US

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

LYN, NOEL LYN, NOEL Name: Name: 9445 SW 146 CT. Address: 15053 SW 109 LANE Address:

MIAMI, FL 33196 US MIAMI, FL 33186 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: LISA LYN 07/24/2006