2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 08, 2008 08:00 AN Secretary of State

DOCUI 1. Entity Name NOAH GII		17			Seci	retary of Sta
Principal Place 2181 SLEEP PALM BAY, F	YHOLLOW ROAD	Mailing Address 2181 SLEEPYHOLLOW ROAD PALM BAY, FL 32905		{	Sile akii seiy asın selil selbi	. SIJA B. 11/61 18/8 ALGA SAGNARI II SARI
D	O NOT WRITE I	CE	02052008 No Chg-P CR2E034 (11/05) 4. FEI Number			
	6. Name and Address of Current Reg	Istered Agent		<u></u>		
PALM BAY	EPYHOLLOW ROAD 7, FL 32905		IN T	NOT WRI	CE	
8. The above the obligation SIGNATURE _	named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and b		red office or registe			am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution				.00 May Be		
10.	OFFICERS AND DIR	ECTORS	_			
NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	D GIBBS, NOAH 2181 SLEEPYHOLLOW ROAD PALM BAY, FL 32905					
STREET ADDRESS CITY-ST-ZIP			_	(:028000990 1008–80481420	119 16-001 150.00
NAME STREET ADDRESS CITY-ST ZIP			<u>,</u>	DO	NOT WR	ITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	'HIS SPA	CE
TITLE NAME STREET ADDRESS	-					•

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHY-ST-ZIP
THILE
NAME
STREET ADDRESS
CHY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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