

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000010783

Entity Name: NOBLE HAUS INC.

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2650 NE 50TH ST  
LIGHTHOUSE POINT, FL 33064

**New Principal Place of Business:**

.PO BOX 50286  
LIGHTHOUSE POINT, FL 33074

**Current Mailing Address:**

PO BOX 50286  
LIGHTHOUSE POINT, FL 33074

**New Mailing Address:**

FEI Number: 27-4657228

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARTER, DEWAYNE  
2650 NE 50TH ST  
LIGHTHOUSE POINT, FL 33064 US

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

CARTER, DEWAYNE  
MAIL BOX 50286  
LIGHTHOUSE POINT, FL 33074 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

02/10/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NOBLE, ROBYN  
Address: 5408 STIRLING RD  
City-St-Zip: DAVIE, FL 33314

Title: VP  
Name: CARTER, DEWAYNE  
Address: PO BOX 50286  
City-St-Zip: LIGHTHOUSE POINT, FL 33074

I hereby 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 all other like empowered.

SIGNATURE: DEWAYNE CARTER

VP

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date