

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000013083

Entity Name: N.B.C. LEISURE, INC.

FILED  
Jul 11, 2011  
Secretary of State

## Current Principal Place of Business:

455 SCHUTT ROAD EXT.  
#215  
MIDDLETOWN, NY 10940 US

## New Principal Place of Business:

5 SUSSEX COURT  
#410  
SUFFERN, NY 10901 US

## Current Mailing Address:

C/O PAUL KOPROWSKI  
10031 PINES BLVD, STE 224  
PEMBROKE PINES, FL 33024 US

## New Mailing Address:

FEI Number: 65-0390385      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOPROWSKI, PAUL A CPA  
10031 PINES BLVD. STE. 224  
PEMBROKE PINES, FL 33024 US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: JACOBS, BARRY L  
Address: 5 SUSSEX COURT APT. 410  
City-St-Zip: SUFFERN, NY 10901 US

Title: V  
Name: JACOBS, CLAUDIA  
Address: 5 SUSSEX COURT APT. 410  
City-St-Zip: SUFFERN, NY 10901 US

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: CLAUDIA JACOBS

V

07/11/2011

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

\_\_\_\_\_  
Date