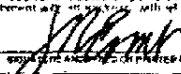


FILED
Apr 30, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P94000054082		
1. Entity Name NOBLECOM INC.		
Principal Place of Business 301 OCEAN DR #402 MIAMI BEACH, FL 33139	Mailing Address 301 OCEAN DR #402 MIAMI BEACH, FL 33139	
DO NOT WRITE IN THIS SPACE		04232004 No Chg-P CR2C034 (10-03)
		4. FEI Number 65-0516317
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent COMBS, J.F. 301 OCEAN DRIVE #402 MIAMI BEACH, FL 33139		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with and accept the obligations of registered agent.		
SIGNATURE _____ Signature must be printed name of registered agent and for a fee of \$5.00.		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contributor ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY ST ZIP	P COMBS, JEFFREY F 301 OCEAN DR #402 MIAMI BEACH, FL 33139	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY ST ZIP	D MCAULIFFE, PAUL FIRST BOSTON PARK AVENUE PLAZA NEW YORK, NY	
TITLE NAME STREET ADDRESS CITY ST ZIP	D DORAN, WILLIAM 1221 AVE OF THE AMERICAS NEW YORK, NY 10020	
TITLE NAME STREET ADDRESS CITY ST ZIP		
TITLE NAME STREET ADDRESS CITY ST ZIP		
TITLE NAME STREET ADDRESS CITY ST ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 780.07(3)(b), 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 609, Florida Statutes, and that my name appears in Block 10 or Block 11 as changed or on an attachment with this filing with all other new employees.		
SIGNATURE:  J.F. COMBS 04/12/04 305-581-3874		