2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P03000132600

Entity Name: NOVEL ARCHITECTURAL PRODUCTS, INC.

Current Principal Place of Business:

3425 NW 167TH
MIAMI, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

1840 N. COMMERCE PARKWAY
#1
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 20-0403412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, DENNIS D ESQ.
TRIPP SCOTT, P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL 33301 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: SCHECHTER, JOHN
Address: 1840 N. COMMERCE PARKWAY, #2
City-St-Zip: WESTON, FL 33326 US

Title: DVPT ( ) Delete
Name: SCHECHTER, BARBARA
Address: 1840 N. COMMERCE PARKWAY, #2
City-St-Zip: WESTON, FL 33326 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change ( ) Addition
Name: SCHECHTER, JOHN
Address: 1840 N. COMMERCE PARKWAY, #2
City-St-Zip: WESTON, FL 33326 US

Title: DVT (X) Change ( ) Addition
Name: SCHECHTER, BARBARA
Address: 1840 N. COMMERCE PARKWAY, #2
City-St-Zip: WESTON, FL 33326 US

Title: P ( ) Change (X) Addition
Name: ROSE, DAVID
Address: 1840 N. COMMERCE PKWY STE 1
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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.

SIGNATURE: DAVID ROSE MR. 04/29/2005

Electronic Signature of Signing Officer or Director Date