

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069679

FILED  
May 01, 2006  
Secretary of State

Entity Name: THE NOVUS CONNECTION INC.

## Current Principal Place of Business:

3071 E SUNRISE LAKES DR SUITE 21-202  
SUNRISE, FL 33322

## New Principal Place of Business:

3071 SUNRISE LAKES DR. E  
202  
SUNRISE, FL 33322

## Current Mailing Address:

3071 E SUNRISE LAKES DR SUITE 21-202  
SUNRISE, FL 33322

## New Mailing Address:

3071 SUNRISE LAKES DR. E  
202  
SUNRISE, FL 33322

FEI Number: 20-1064881

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DESMONTEIX, OSCAR E.  
3071 E. SUNRISE LAKES DRIVE  
SUITE 21-202  
SUNRISE, FL 33322 US

## Name and Address of New Registered Agent:

DESMONTEIX, OSCAR E MR.  
3071 SUNRISE LAKES DR. E  
202  
SUNRISE, FL 33322 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: OSCAR E. DEMONTEIX

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: DESMONTEIX, OSCAR E  
Address: 3071 E SUNRISE LAKES DR SUITE 21-202  
City-St-Zip: SUNRISE, FL 33322

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: DESMONTEIX, OSCAR E MR.  
Address: 3071 SUNRISE LAKES DR. E, #202  
City-St-Zip: SUNRISE, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: OSCAR E. DESMONTEIX

MR.

05/01/2006

Electronic Signature of Signing Officer or Director

Date