

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34187

FILED
Mar 31, 2005
Secretary of State

Entity Name: NOVUS INTERNATIONAL, INC.

Current Principal Place of Business:

530 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

New Principal Place of Business:

Current Mailing Address:

530 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

New Mailing Address:

FEI Number: 43-1575758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCOO () Delete
Name: SIMONS, JR, THAD W
Address: 530 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

Title: TD () Delete
Name: TAGUCHI, KOHEI
Address: 530 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

Title: SD () Delete
Name: INOUE, MAKOTO
Address: 530 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

Title: D () Delete
Name: SUZUKI, HIROFUMI
Address: 530 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

Title: CD () Delete
Name: OGAWA, RYU
Address: 2-1 OHEMACHI 1 CHOME
City-St-Zip: CHIYODA-KU-TOKYO-100 JAPAN, US

Title: AS () Delete
Name: STERKEL, ALICE V
Address: 530 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: INOUE, MAKOTO
Address: 530 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

Title: D (X) Change () Addition
Name: ENDO, YUSUKE
Address: 530 MARYVILLE CENTRE DRIVE
City-St-Zip: ST. LOUIS, MO 63141 US

Title: CD (X) Change () Addition
Name: FUKUNAGA, TAKASHI
Address: 2-1 OHEMACHI 1 CHOME
City-St-Zip: CHIYODA-KU-TOKYO-100 JAPAN, JP 100 JP

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALICE V. STERKEL

AS

03/31/2005

Electronic Signature of Signing Officer or Director

Date