2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 AM
Secretary of State

DOCUMENT# P95000016043

Entity Name: NOVO PRODUCTS, INC.

Current Principal Place of Business:

519 SW 31ST AVENUE
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

24800 DENSO DRIVE
SUITE 255
SOUTHFIELD, MI 48034

New Mailing Address:

FEI Number: 59-3298649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: REINS, RALPH E
Address: 24800 DENSO DRIVE SUITE 255
City-St-Zip: SOUTHFIELD, MI 48034

Title: VPTS ( ) Delete
Name: BORELLIS, MICHAEL C
Address: 24800 DENSO DRIVE SUITE 255
City-St-Zip: SOUTHFIELD, MI 48034

Title: S ( ) Delete
Name: BOLTON, RICHARD M
Address: 500 WOODWARD AVE SUITE 4000
City-St-Zip: DETROIT, MI 48226

Title: D ( ) Delete
Name: CUMMINGS, ROBERT L
Address: ONE TOWNE CENTER SUITE 780
City-St-Zip: SOUTHFIELD, MI 48076

Title: P (X) Delete
Name: BLACKALL, GARY
Address: 534 EAST 48TH STREET
City-St-Zip: HOLLAND, MI 49423

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MICHAEL C. BORELLIS VPTS 05/02/2002

Electronic Signature of Signing Officer or Director Date