2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2007
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

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: PRES ( ) Delete
Name: SCOTT, BYE
Address: 534 EAST 48TH ST.
City-St-Zip: HOLLAND, MI 49423

Title: VPT ( ) Delete
Name: GIBARATZ, SCOTT
Address: 24800 DENSO DRIVE SUITE 255
City-St-Zip: SOUTHFIELD, MI 48034

Title: VP ( ) Delete
Name: SNELL, RICHARD
Address: 24800 DENSO DRIVE SUITE 255
City-St-Zip: SOUTHFILE, MI 48034

Title: VPS ( ) Delete
Name: DICKINSON, DAN
Address: 1455 PENNSYLVANIA AVENUE, NW, SUITE 350
City-St-Zip: WASHINGTON, DC 20004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: DAVID, KROHN
Address: 534 EAST 48TH ST.
City-St-Zip: HOLLAND, MI 49423

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 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: SAIF IMAM CONT 07/14/2007

Electronic Signature of Signing Officer or Director Date