

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053239

Entity Name: NUCCELL PRODUCTS, INC.

FILED
Mar 28, 2007
Secretary of State

Current Principal Place of Business:

21175 MAIN SAIL CIRCLE
E-15
AVENTURA, FL 33180 US

Current Mailing Address:

21175 MAIN SAIL CIRCLE
E-15
AVENTURA, FL 33180 US

New Principal Place of Business:

1830 S. OCEAN DRIVE
1902
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

1830 S. OCEAN DRIVE
1902
HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0599724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAPIRO, MANUEL
21175 MAIN SAIL CIRCLE
E-15
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

SCHAPIRO, MANUEL
1830 S. OCEAN DRIVE
1902
HALLANDALE BEACH, FL 33008 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:

03/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHAPIRO, MANUEL
Address: 21175 MAIN SAIL CIRCLE E-15
City-St-Zip: AVENTURA, FL 33180

Title: SD () Delete
Name: SCHAPIRO, SUSY
Address: 21175 MAIN SAIL CIRCLE E-15
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHAPIRO, MANUEL
Address: 1830 S. OCEAN DRIVE, SUITE 1902
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: SD (X) Change () Addition
Name: SCHAPIRO, SUSY
Address: 1830 S. OCEAN DRIVE, SUITE 1902
City-St-Zip: HALLANDALE BEACH, FL 33009

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: MANUEL SCHAPIRO

PD

03/28/2007

Electronic Signature of Signing Officer or Director

Date