


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000089572	
1. Entity Name NOVASENSE, INC.	

Principal Place of Business 20721 QUINELLA ST ORLANDO, FL 32833	Mailing Address 20721 QUINELLA ST ORLANDO, FL 32833
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DO NOT WRITE IN THIS SPACE



02082007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3539508	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LAROYEV, AMERI 343 ALMERIA AVENUE CORAL GABLES, FL 33134

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	DATE 03/01/07-80018-008 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD NASER, LISA S 110 WHEATLEY CARY, NC 27513
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD NASER, NAJIH A 110 WHEATLEY CARY, NC 27513
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  LISAS NASER	2/10/07	919-740-3126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #