

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000023549

FILED
Feb 17, 2004
Secretary of State

Entity Name: THE NOVELLA GROUP, INC.

Current Principal Place of Business:

2707 N ANDREWS AVE
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2707 N ANDREWS AVE
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0903847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METZLER, CHRISTOPHER
1498 NW 54 ST
MIAMI, FL 33142 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: P () Delete
Name: METZLER, INGRID
Address: 7115 SPORTSMAN DRIVE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: V () Delete
Name: METZLER, MICHELLE
Address: 6305 NW 23 ST
City-St-Zip: MARGATE, FL 33063

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CEO () Change (X) Addition
Name: THOMAS, VERNON E MD
Address: 2707 N ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: COO () Change (X) Addition
Name: SCHNEIDER, JONATHAN
Address: 6305 NW 23 STREET
City-St-Zip: MARGATE, FL 33063

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: MICHELLE METZLER

VP

02/17/2004

Electronic Signature of Signing Officer or Director

_____ Date