

NOVA.spect.....

**ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT  
FOR INFUNDED NONQUALIFIED DEFERRED COMPENSATION PLANS**

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

January 10, 2005

Top Hat Plan Exemption  
Pension and Welfare Benefits Administration  
Room N-6544  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington D.C. 20210

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I on the Employee Retirement Income Security Act of 1974 for unfunded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 C.F.R. Sec. 2520, 104-23, the following information is provided by the undersigned employer.

*Name and Address of Employer:*

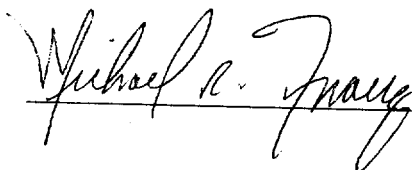
Novaspect, Inc.  
1776 Commerce Drive  
Elk Grove Village, IL 60007

*Employer Identification Number:* 36-2585273

Novaspect, Inc. maintains One (1) plan covering Seven (7) participants primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

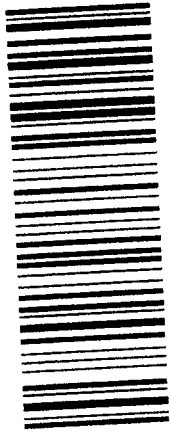
Dated: January 10<sup>th</sup>, 2005

Plan Administrator:

  
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**NOVAspect**.....

1776 Commerce Drive  
Elk Grove Village, IL 60007-2120



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