2003 FOR PROFIT CORPORATION INIFORM BUSINESS REPORT (UBR)

UN	003 FOR PROFI	SS REPOR			FILED May 02, 2003 8:00 am Secretary of State	0017076	
1. Entity Nan	MENT # P9300 TORDER, INC.	0031793			05-02-2003 90758 003 ***150.00	AV	
Principal Plac ONE HARGRO #1-B	ce of Business DVE GRADE	Mailing Address ONE HARGROVE GRADE #1-B					
	Place of Business	PALM COAST FL 32137 US 3. Mailing Address					
Suite, Apt.		Suite, Apt. #, etc.	15y C1		☐ CHECK HERE IF MAKING CHANGES		
Polos	Coost	City & State			4. FEI Number 98-0136277 Applied For Not Applicable	ļ	
-32/	37 Country	Zip	Country		5. Certificate of Status Desired	I	
	6. Name and Address of Current F	legistered Agent	Nes		7. Name and Address of New Registered Agent	 	
LARSSON, KJELL ONE HARGROVE GRADE				Street Address (P.O. Box Number is Not Acceptable)			
STE 1B PALM COAST FL 32137				8 Sherbury Ct City Palm Coast 1 FL 32000 37			
the obligat	e named entity submits this statement for tions of registered agent. Signature, typed or printo name of registered agent ar ILE NOW! FEE IS \$150.00	CHRISTER 30	registered office the second s	,	od agent, or both, in the State of Florida. I am familiar with, and accept 4/11/0 3 when reinstating) DATE		
Afte	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
10	OFFICERS AND D		11.	1/4	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 STOR JUNIONSSON Change Addition	ର	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LARSSON, EVA 49 FRONTIER DR PALM COAST FL 32137	Delete	TITLE NAME STREET ADOR CITY-ST-ZIP	ESS 851 Folm	esident herbuny Ct	CR2E034 (10/02)	
TITLE NAME STREET ADDRESS CITY-\$T-ZIP	D Drakelid, Stefan Snackv 5 Voxholm, Sweden S-185-4	□ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	MA	re Lary Change Change Change regarder Folsons Her Dury CF Im Coast FL 32137	CR2	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHARLA, PAUL M 603 CHARLES ST PORT ORANGE FL 32127	Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS CA	Ton Changes of Thomas Antition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, JOHN 16910 DALLAS PWY STE 104 DALLAS TX 75287	Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SZYMANSKI, RONALD S COMANCHE CT PALM COAST FL 32137	L. Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ESS	☐ Change ☐ Addition		
12. I hereby of indicated	certify that the information supplied with t on this report or supplemental report is t	his filing does not qualify for rue and accurate and that n	the exemption	stated in Sect all have the sa	tion 119.07(3)(i), Florida Statutes. I further certify that the information me legal effect as if made under oath; that I am an officer or director		

changed, or on an attachment wit

SIGNATURE: