

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000089048

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

Entity Name: NETCOM CONSULTING, INC.

## Current Principal Place of Business:

980 N FEDERAL HWY  
SUITE 303  
BOCA RATON, FL 33432 US

## Current Mailing Address:

980 N FEDERAL HWY  
SUITE 303  
BOCA RATON, FL 33432 US

FEI Number: 65-0723168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## New Principal Place of Business:

1500 UNIVERSITY DRIVE  
SUITE 117  
CORAL SPRINGS, FL 33071 US

## New Mailing Address:

1500 UNIVERSITY DRIVE  
SUITE 117  
CORAL SPRINGS, FL 33071 US

## Name and Address of Current Registered Agent:

SAHRAKORPI, TERO S  
980 N FEDERAL HWY  
SUITE 303  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

SAHRAKORPI, TERO S  
1500 UNIVERSITY DRIVE  
SUITE 117  
CORAL SPRINGS, FL 33071 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: TERO SAHRAKORPI

04/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SAHRAKORPI, TERO S  
Address: 980 N FEDERAL HWY, #303  
City-St-Zip: BOCA RATON, FL 33432

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SAHRAKORPI, TERO S  
Address: 1500 UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071 US

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: TERO SAHRAKORPI

PRES

04/25/2002

Electronic Signature of Signing Officer or Director

Date