

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000001539

FILED  
May 01, 2003  
Secretary of State

Entity Name: WAVE7 OPTICS, INC.

## Current Principal Place of Business:

8010 WOODLAND CENTER BLVD  
SUITE 500  
TAMPA, FL 33614

## New Principal Place of Business:

## Current Mailing Address:

1075 WINDWARD RIDGE PKWY  
SUITE 170  
ALPHARETTA, GA 30005

## New Mailing Address:

FEI Number: 94-3365657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C ( ) Delete  
Name: GRAHAM, HATCH  
Address: 1075 WINDWARD RIDGE PKWY SUITE 170  
City-St-Zip: ALPHARETTA, GA 30005

Title: D ( ) Delete  
Name: PARSA, HASSAN  
Address: 3180 PORTER DR SUITE D  
City-St-Zip: PALO ALTO, CA 94304

Title: D ( ) Delete  
Name: BELLAS, ROBIN  
Address: 2730 SAND HILL RD SUITE 280  
City-St-Zip: MENLO PARK, CA 94025

Title: P ( ) Delete  
Name: TIGHE, THOMAS  
Address: 1075 WINDWARD RIDGE PKWY SUITE 170  
City-St-Zip: ALPHARETTA, GA 30005

Title: S ( ) Delete  
Name: PIGOTT, MARK  
Address: 1075 WINDWARD RIDGE PKWY SUITE 170  
City-St-Zip: ALPHARETTA, GA 30005

Title: D ( ) Delete  
Name: HARRINGTON, JACK  
Address: 485 RAMONA ST.  
City-St-Zip: PALO ALTO, CA 94301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: HANLEY, JOHN  
Address: 600 MOUNTAIN AVE, 6A-404  
City-St-Zip: MURRAY HILL, NJ 07974

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

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

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

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

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: MARK PIGOTT

S

05/01/2003

Electronic Signature of Signing Officer or Director

Date

DAVID WALROD, DIRECTOR  
525 UNIVERSITY AVE  
SUITE 1300  
PALO ALTO, CA 94301