2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2002
Secretary of State

DOCUMENT# F97000003875

Entity Name: CONTROLNET INTERNATIONAL LTD., INC.

Current Principal Place of Business:

20423 STATE RD 7 #F6
PMB 315
BOCA RATON, FL 33498

New Principal Place of Business:

Current Mailing Address:

20423 STATE RD 7 #F6
PMB 315
BOCA RATON, FL 33498

New Mailing Address:

FEI Number: 62-1700535 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOSS, WILLIAM H
20423 STATE RD 7 #F6
PMB 315
BOCA RATON, FL 33498

Name and Address of New Registered Agent:

VOSS, KATHERINE R
20423 STATE RD 7 #F6
PMB 315
BOCA RATON, FL 33498

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: KATHERINE R VOSS 07/19/2002
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	EISNER, DAVID	
Address:	16404 N BLACK	
City-St-Zip:	PHOENIX, AZ 85023	
Title:	DT	( ) Delete
Name:	DELEON, JACK	
Address:	1 ALLEN BRADLEY DR	
City-St-Zip:	MAYFIELD HTS, OH 44124	
Title:	S	( ) Delete
Name:	MOSS, WILLIAM H	
Address:	PMB 315- 20423 STATE RD 7 #F6	
City-St-Zip:	BOCA RATON, FL 33498	
Title:	V	( ) Delete
Name:	HABBSJER, NICHOLAS	
Address:	PILEFELTSGATAN 73	
City-St-Zip:	HALMSTAD, SW 30250	
Title:	D	( ) Delete
Name:	KNAKE, KEVIN	
Address:	1830 RESEARCH DR SUITE 300	
City-St-Zip:	TROY, MI 480832162	
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:	S	(X) Change ( ) Addition
Name:	VOSS, KATHERINE R	
Address:	PMB 315- 20423 STATE RD 7 #F6	
City-St-Zip:	BOCA RATON, FL 33498	
Title:	V	(X) Change ( ) Addition
Name:	HASSBJER, NICHOLAS	
Address:	PILEFELTSGATAN 93-95	
City-St-Zip:	HALMSTAD, SW 30250	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	DAHLSTROM, CARL S	
Address:	PILEFELTSGATAN 93-95	
City-St-Zip:	HALMSTAD, SW 30250	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE R VOSS S 07/19/2002
Electronic Signature of Signing Officer or Director Date