2002 UNIFORM BUSINESS REPORT (UBR)

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

DOCUMENT# P00000012198

Entity Name: KRAFT SOLUTIONS, INC.

Current Principal Place of Business:

543 BROOKHAVEN DR
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

543 BROOKHAVEN DR
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-3625303 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLVEY, DOUGLAS A
543 BROOKHAVEN DR
ORLANDO, FL 32803

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

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: OLVEY, DOUGLAS A
Address: 543 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: CHIMELIS, RAMON
Address: 543 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32803

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: OLVEY, DOUGLAS A
Address: 543 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32803

Title: VP (X) Change ( ) Addition
Name: CHIMELIS, RAMON
Address: 543 BROOKHAVEN DR
City-St-Zip: ORLANDO, FL 32803

Title: SEC ( ) Change (X) Addition
Name: MITTLEMAN, LISA I
Address: 543 BROOKHAVEN DRIVE
City-St-Zip: ORLANDO, FL 32803

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: LISA MITTLEMAN SEC 06/25/2002

Electronic Signature of Signing Officer or Director — Date