P02000009293 LOUIS X. AMATO, P.A.

LOUIS X. AMATO (941) 596-2150 Direct Dial (941) 596-1214 Direct Fax

BETH A. GAUSE (941) 596-2152 Direct Dial 801 Laurel Oak Drive Suite 615 Naples, FL 34108

(941) 596-6500 Fax (941) 596-2000

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February 8, 2002

Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Attn: Thelma Lewis

Re:

Teragram, Inc.

Dear Ms. Lewis:

As per our telephone conversation today, encllosed please find our law firm check in the amount of \$35.00 representing the filing fee for the Statement of Change of Registered Office or Registered Agent, or Both to be filed with the Secretary of State.

Thank you for your assistance in this matter.

Very truly yours,

RACHEL DeSIMONE

Legal Assistant

/rmd enclosure

cc: Claes Mouret

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SECRETARY OF STATE

ALL ANGESSEE, FLORIDA

RA charge 2/20/02

LOUIS X. AMATO, P.A. ATTORNEYS AT LAW

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(941) 596-6500 Fax (941) 596-2000

February 8, 2002

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Teragram, Inc.

Dear Sir or Madam:

Enclosed please find an original and one copy of Statement of Change of Registered Office or Registered Agent, or Both to be filed with the Secretary of State. Please file the same and return to me a time-stamped copy in the enclosed, self-addressed envelope.

Thank you for your assistance in this matter.

Very fruly yours,

RACHEL DeSIMONE

Legal Assistant

/rmd

enclosure

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

- Pursuant to the provisions of Section 607.0502, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
 - 1. The name of the corporation is:

TERAGRAM, INC.

2. The name and address of the present registered agent and office:

David J. Szempruch 1826 Trade Center Way, Suite I, Naples, Florida 34109

3. The name and address of the successor registered agent and office: (P.O. BOX NOT ACCEPTABLE)



Claes Mouret 1940 Sandpiper Street, Naples, Florida 34102

The address of its registered agent and the address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors.

SIGNATURE_

CLAES MOURET, President

DATE 02 07 02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.0505, FLORIDA STATUTES.

SIGNATURE

(Registered Agent)

DATE

02/07/02