2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000031793

Entity Name: TIGERNET ORDER, INC

FILED Apr 26, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE HARGROVE GRADE #1-B PALM COAST, FL 32137 **Current Mailing Address: New Mailing Address:** ONE HARGROVE GRADE PALM COAST, FL 32137 US FEI Number: 98-0136277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LARSSON, KJELL ONE HARGROVE GRADE PALM COAST, FL 32137 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LARSSON, KJELL Name: Name: 49 FRONTIER DR Address: Address: City-St-Zip: PALM COAST, FL 32137 OC City-St-Zip: Title: Title: () Delete () Change () Addition LARSSON, EVA Name: Name: 49 FRONTIER DR Address: Address: PALM COAST, FL 32137 OC City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition DRAKELID, STEFAN Name: Name: SNACKV 5 Address: Address: City-St-Zip: VOXHOLM, SWEDEN, S-1854 City-St-Zip: Title: () Delete Title: () Change () Addition CHARLA, PAUL M Name: Name: Address: 603 CHARLES ST Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: Title: () Delete () Change () Addition FOSTER, JOHN Name: Name: 16910 DALLAS PWY STE 104 Address: Address: City-St-Zip: DALLAS, TX 75287 City-St-Zip: Title: () Delete Title: () Change () Addition SZYMANSKI, RONALD S Name: Name: COMANCHE CT Address: Address: City-St-Zip: City-St-Zip: PALM COAST, FL 32137

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: KJELL G LARSSON P 04/26/2002