2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000009506

Entity Name: TAMAR CONSULTING CORP.

FILED Jan 28, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

170 OCEAN LANE APT. 305

KEY BISCAYNE, FL 33144 US

Current Mailing Address: New Mailing Address:

P.O. BOX 347102

CORAL GABLES, FL 33234 US

FEI Number: 65-0810276 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:

DOVARGAVES, RAFAEL DOVARGANES, RAFAEL E

170 OCEAN LANE 170 OCEAN LANE APT. 305 APT. 305

KEY BISCAYNE, FL 33144 US KEY BISCAYNE, FL 33144 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: RAFAEL E DOVARGANES 01/28/2002

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: PS (X) Delete Title: () Change () Addition

 Name:
 BOUHADANA, JOSEPH
 Name:

 Address:
 170 OCEAN LANE
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 33144 US
 City-St-Zip:

Title: VT () Delete Title: PSVT (X) Change () Addition

Name: DOVARGANES, RAFAEL Name: DOVARGANES, RAFAEL E Address: 170 OCEAN LANE Address: 170 OCEAN LANE

City-St-Zip: KEY BISCAYNE, FL 33144 US City-St-Zip: KEY BISCAYNE, FL 33149 US

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: RAFAEL E DOVARGANES PSVT 01/28/2002