2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P40346

1. Entity Name

GLOBAL TEL*LINK CORPORATION



FILED Jul 13, 2004 8:00 am Secretary of State

07-13-2004 90006 037 ***550.00

Principal Place of Business

2609 CAMERON STREET MOBILE, AL 36607

Mailing Address

2609 CAMERON STREET MOBILE, AL 36607



03152003

No Chg-P

CR2E034 (10/03)

4. FEI Number 63-1071001

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOWIII FEE IS \$550.00 Due by September 8, 2004 9. Election Campaign Finan Trust Fund Contribution.		• —	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS		· ···		
TITLE	D .					
NAME	SCHOONBEEK, JURREN					
STREET ADDRESS	277 PARK AVE					
CITY-ST-ZIP	NEW YORK, NY 10172					
TITLE	AS- UP				•	
NAME	RIDGEWAY, TERESA					
STREET ADDRESS	2609 CAMERON ST					
CITY-ST-ZIP	MOBILE, AL 36607	e po rtu gue ante esta e e	-			
TITLE	D					
NAME	LIM, TAIK HAW		1			
STREET ADDRESS	277 PARK AVENUE		1	DO NOT WRITE IN THIS SPACE		
CITY-ST-ZIP	NEW YORK, NY 10172					
TITLE	PD					
NAME	FERGUSON, CRAIG			IN THIS SPACE		
STREET ADDRESS	2609 CAMERON STREET		l l			

12. I hereby certify that the information supplied with this fling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MOBILE, AL 36607

MOBILE, AL 36607

YOW, STEVE 2609 CAMERON ST

TC

SIGNATURE AND TYPED OR PRINTED NAME OF SQUING OFFICER OR DIRECTOR

6/18/04 25/479-4500 Ext.