

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 \* AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

99 OCT 11 PM 4: 12

PROFIT CORPORATION  
 ANNUAL REPORT  
 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Kortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P96000066177 (2)

1. Corporation Name  
 CONSULT-LINK INTERNATIONAL SERVICES, INC.



REINSTATEMENT 98-99

Principal Place of Business 1809 MICANOPY AVENUE C/O WANDA PISTELLA MIAMI FL 33133		Mailing Address 1809 MICANOPY AVENUE C/O WANDA PISTELLA MIAMI FL 33133		3. Date Incorporated or Qualified 08/05/1996	
21	2. Principal Place of Business 2601 S. BAYSHORE DR	26	2a. Mailing Address	4. FEI Number 65-0690963	Applied For Not Applicable
22	Suite, Apt. #, etc. SUITE 2040	27	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	City & State MIAMI FL	28	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Zip 33133	25	Country MAMIDADE	29	Zip
30	Country	31	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent PISTELLA, WANDA 1809 MICANOPY AVENUE MIAMI FL 33133				10. Name and Address of New Registered Agent	
81	Name	CARLOS ULLOA			
82	Street Address (P.O. Box Number is Not Acceptable)	2601 S. BAYSHORE DR			
83		SUITE 2040			
84	City	MIAMI	85	Zip Code	33133

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: CARLOS ULLOA DATE: August 10, 1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PISTELLA, WANDA	1.2 NAME	CARLOS ULLOA
STREET ADDRESS	1809 MICANOPY AVENUE	1.3 STREET ADDRESS	2601 S BAYSHORE DR SUITE 2040
CITY-ST-ZIP	MIAMI FL 33133	1.4 CITY-ST-ZIP	MIAMI FL 33133
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	400003022944-3
CITY-ST-ZIP		3.4 CITY-ST-ZIP	-10/22/99-01110-008
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	***900.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 118.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CARLOS ULLOA August 10, 1999 (305) 256-5500