FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 847975

AMERILINK CORPORATION

Principal Plac	e of Business	Mailing Address			***************************************	***** 8:81: 8 6) 8 8 8 8 8	1911 91917 192 1
1900 E DUBLIN GRANVILLE RD 1900 E DUBLIN GRANVILLE COLUMBUS OH 43229 COLUMBUS OH 43229		RD		DO NOT MIDITE IN	TUIC CDACE		
	•				DO NOT WRITE IN	THIS SPACE	
	·				3. Date Incorporated or Qualifed 01/16/1981		
	Place of Business	2a. Mailing Address			4. FEI Number	<u></u>	plied For
21		26			31-0998690		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Stat	te •	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Countr	У	8. This corporation owes the current ye		
24	25	11	30		Personal Property Tax.		☑No
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Regist	tered Agent	
	CORPORATION SYSTEM OS: PINE ISLAND ROAD		8:		ress (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324		. 8:	_	. W. Think of a malay was a trining of a mark		eta erense igalij	
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			. 84	4 City		FI 85 Zip C	òde
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statute	s. the abov	ve-named corp	poration submits this statement for the purpo	<u> </u>	registered
office or r		of Florida. Such change was au	thorized by	y the corporation	on's board of directors. I hereby accept the		
SIGNATURE	Signature, typed or printed name of registered agen				d when reinstating) DA		
12.	OFFICERS AN		13.	ant agretions require	ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	CSD	☐ DELETE	1.1 TITLE				
NAME	POWELSON, ROBERT				18 1 1 1 1 1 1 1 1 1 1	☐ Change	Addition
STREET ADDRESS	1900 E. DUBLIN GRANVILLE		1.2 NAME		18 Co. 18 Co.	☐ Change	
CITY-ST-ZIP			1.2 NAME		is for a set	☐ Change	
			1.3 STREE	ET ADDRESS	is for each	☐ Change	
	COLUMBUS OH	. DELETE	1.3 STREE	ET ADDRESS	is fire a set		Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 received 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 chapted, or or an attactor of the corporation or the received or trustee empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

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COLUMBIN 3.1

FILED

Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90022 013 ***158.75