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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Infolink Communication Services, Inc.	corporation)
(Name of	corporation)
DOCUMENT NUMBER:	
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	- ·
Trease return an correspondence concerning his matter to	the following.
Yosef Garbi	
(Name o	f person)
Infolink Communication Services, Inc.	
(Name of fir	rm/company)
1521 Alton Road	
	lress)
Miami Beach, FL 33139	
	and zip code)
· ·	• ′
For further information concerning this matter, please call	
Yosef Garbi	at (305) 322-6293 (Area code & daytime telephone number)
(Name of person)	(Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Departme	ent of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street
Tallahassee, FL 32314	Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	· · · · · · · · · · · · · · · · · · ·	2, 607.1508, or 617.1508, Florida Statutes, th	
_	tted for a corporation organized under th zistered office or registered agent, or both		in order
to change its re	usierea office or registerea agent, or votr	n, in the State of Florida.	
1. The name of	the corporation: Infolink Communication	Services, Inc.	
2. The principal	office address: 1521 Alton Road, Miami	Beach, FL 33139	
3. The mailing a	ddress (if different):		
4. Date of incom	poration/qualification: 3/13/2000	Document number: F00000001443	
	I street address of the current registered ag trment of State:	gent and registered office on file with the	r
	LEARY III, PRIEUR J		<u> </u>
	2400 EAST LAS OLAS BLVD., STE 26	58 AS	O4 MAY 2
	FT LAUDERDALE FL 33301	SE CONTRACTOR OF	
6. The name and (if changed):	l street address of the new registered agen	at (if changed) and /or registered office	
	Scott Daly	A '	•
	8500 Water Way Place		
	(P.O. Box or personal r	nailbox NOT acceptable)	
	Orlando, FL 32827	<u> </u>	
The street addre	ess of its registered office and the street identical.	address of the business office of its registere	d agent, as
Such change with board, or the	is authorized by resolution duly adopted for poration has been notified in writing	I by its board of directors or by an officer so g of the change.	authorized by
	1/-//	Prieur Leary/CEO	
I hereby accept I further agree a duties, and I ap being filed mere	the appointment as registered agent and comply with the provisions of all state familiar with and accept the obligation lyto reflect a change in the registered continuously this change.	d agree to act in this capacity. utes relative to the proper and complete perf of my position as registered agent. Or, if the office address, I hereby confirm that the corp	
	() () () () () () () () () ()	5/24/2004	
ν /	(Signature of Registered Agent)	(Date)	
11 Signing on be	half of an entity:		
	(Typed or Printed Name)	(Capacity)	

* * * FILING FEE: \$35.00 * * *