## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F02000004166

Entity Name: STARLINK ENTERPRISES DOTCOM, INC.

FILED Jan 04, 2003 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	63 PLACE ID, FL 33067				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	63 PLACE ID, FL 33067				
FEI Number	: 43-1965439	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	MONICA 63 PLACE ID, FL 33067				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
	mpaign Financin S AND DIREC	g Trust Fund Contribution(). TORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DCP ( MURIEL, MON 5710 NW 63RI PARKLAND, F	) PL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VCVP ( MURIEL, CARI 5710 NW 63 P PARKLAND, F	LACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST ( MURIEL, CARI 5710 NW 63 P PARKLAND, F	LACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: MONICA MURIEL DCP 01/04/2003