2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2006
Secretary of State

DOCUMENT# F05000004773

Entity Name: TECHLINKS INDUSTRIES INC.

Current Principal Place of Business:

480 SW 203RD AVE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

21011 JOHNSON STREET, STE. 102
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 13-4217894 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DASILVA, IVANILDO
Address: 480 SW 203RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ST ( ) Delete
Name: DASILVA, KELY
Address: 480 SW 203RD AVE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete
Name: WEAVER, CHRYSTAL
Address: 16532 NW 21ST ST.
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: IVANILDO DASILVA P 06/15/2006

Electronic Signature of Signing Officer or Director — Date