

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 18, 2008 8:00 am**  
**Secretary of State**

07-18-2008 90016 015 \*\*\*150.00

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07082008 Chg-P CR2E034 (12/06)

<b>DOCUMENT # F06000004029</b>					
<b>1. Entity Name</b> INTERLINK SECURITIES CORP.					
<b>Principal Place of Business</b> 20750 VENTURA BLVD. WOODLAND HILLS, CA 91364			<b>Mailing Address</b> 121 RIVER STREET TAX DEPT 11TH FL HOBOKEN, NJ 07030		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 95-4383311	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	PSD WOLFE, BARRY L 20750 VENTURA BLVD. WOODLAND HILLS, CA 91364		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	President/Director/CEO Luis Gregory Ordonez 322 Carnegie Center Princeton, NJ 08543	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	V GIGLIOTTI, JOSEPH P WATERFRONT CORP. CNTR., 121 WATER STREET HOBOKEN, NJ 07030		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP		
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<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> _____			7/8/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
Daytime Phone #					