

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000000168

**FILED**  
**May 04, 2011**  
**Secretary of State**

**Entity Name:** GREENLINK NETWORKS, INC.

**Current Principal Place of Business:**

640 FREEDOM DRIVE  
SUITE 201  
KING OF PRUSSIA, PA 19406

**New Principal Place of Business:**

1265 DRUMMERS LN  
SUITE 106  
WAYNE, PA 19087

**Current Mailing Address:**

2151 LAS PALMAS DRIVE  
SUITE E  
CARLSBAD, CA 92011

**New Mailing Address:**

16130 VENTURA BLVD  
SUITE 250  
ENCINO, CA 91436

**FEI Number:** 26-1172875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 333240000 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

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: MALEWICZ, BRIAN T  
Address: 1858 SHADETREE DR  
City-St-Zip: SAN MARCOS, CA 92078

Title: DS  
Name: JANNETTA, DAVID L  
Address: 1135 PARSON CURRY RD  
City-St-Zip: MALVERN, PA 19355

Title: D  
Name: BURNS, MICHAEL  
Address: 1265 DRUMMERS LN SUITE 250  
City-St-Zip: WAYNE, PA 19087

I hereby 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 all other like empowered.

SIGNATURE: BRIAN MALEWICZ

DPT

05/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date