

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000001820 (7)

1. Corporation Name  
IMAGELINKS, INC.

Principal Place of Business

Mailing Address

4450 W EAU GALLIE BLVD  
STE 164  
MELBOURNE FL 32934  
US

4450 W EAU GALLIE BLVD  
STE 164  
MELBOURNE FL 32934  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/11/1996

4. FEI Number

59-3371327

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN III, FAYETTE  
4450 W EAU GALLIE BLVD  
STE 164  
MELBOURNE FL 32934

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Fayette Brown III*  
Signature typed or printed name of registered agent and title if applicable

VP, Secy & Treas

(If not Registered Agent signature required when reinstating)

4/29/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP ☐ DELETE

NAME BAKER, FRANK H  
STREET ADDRESS 4180 SPARROW HAWK RD  
CITY-ST-ZIP MELBOURNE FL

TITLE VPST ☐ DELETE

NAME BROWN III, FAYETTE  
STREET ADDRESS 429 RED SAIL WAY  
CITY-ST-ZIP SATELLITE BCH FL

TITLE DC ☐ DELETE

NAME BUCHANAN, STEPHEN W  
STREET ADDRESS 2700 COLTSGATE RD STE 202  
CITY-ST-ZIP CHARLOTTE NC

TITLE D ☐ DELETE

NAME DELIMITROS, THOMAS  
STREET ADDRESS 8204 ELMBROOK STE 101  
CITY-ST-ZIP DALLAS TX

TITLE DP ☐ DELETE

NAME DUPONT III, W DANIEL  
STREET ADDRESS 3019 W ONTARIO CIRCLE  
CITY-ST-ZIP MELBOURNE FL

TITLE D ☐ DELETE

NAME HENDERSON, ROBERT P  
STREET ADDRESS 820 KERRY DOWNS CIRCLE  
CITY-ST-ZIP MELBOURNE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VP LUCAS, Mark R.

363 Marlin Place

Melbourne Bch, FL 32951

Peter A. Michael

8880 Esters Blvd

Irving Tx 75063

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Fayette Brown III*

FAYETTE BROWN III

4/29/98 407 253 0011

CR2E034 (10/97)