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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600002187 (0)								
USA G	LOBAL LINK, INC.				4 100((100 (())) (0)))	8491 2 6 0)1 8 8 141	1 (400) (<u>60) (8</u> 1	III (88 1 1 98)
Principal Place of Business		Mailing Address		i conine illa mila attit antil entil A		/ 1(88) (1881 18	 	
50 NORTH THIRD STREET		50 NORTH THIRD STREET						
FAIRFIELD IA	52556	FAIRFIELD IA 52556			DO NOT WRIT	E IN THIS S	PACE	
					3. Date Incorporated or Qualified			
					04/29/1996			
	cipal Place of Business 2a, Mailing Address				4. FEI Number			oplied For
Suite, Apt #, etc.		26			42-1450930		\$8.75	ot Applicable
22		27		5. Certificate of Status Desired			equired	
City & State		City & State		6. Election Campaign Financing		\$5.00		
23		28		Trust Fund Contribution			to Fees	
Zip	h		Country	b. This corporation of the paid the carrotty		~		
24]	25 Name and Address of Current	[29] Registered Agent	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
DA	NIEL HARNETT C/O MCDERMOTT	-	81	Name	10, Haile alla Audress of From 1,	agiate.e.,	ragin.	
	NIEL HANNETT C/O MICDENMOTT 1 SOUTH BISCAYNE BLVD. 22ND		100	l	200 B- 41 - h l- M 4			
	AMI FL 33131-4336	LOON	82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
	WWW 1 C C C C C C C C C C C C C C C C C		83					
			84	City			85 Zip (Code
						<u>FL</u>		
office or r	egistere d agent, or both, in the State c	of Florida, Such change was	s authorized bi	y the corpora	poration submits this statement for the tion's board of directors. I hereby acce	purpose of ept the app	changing it pintment as	ls registered registered
agent La	m familiar with, and accept the obligat	ions of, Section 607.0505, F	Iorida Statute	S.				
SIGNATURE	Signature Typed or posited name of regulateral again	Free tide d'applicable (NG	OTF Registered Aq	oni signalure regu	ired when reinstating)	DATE		
12,	OF ICERS AND		13.		ADDITIONS/CHANGES TO OFFI		DIRECTOF	RS IN 12
TITLE	P	DELETE	1 1 TOTLE				Change	Addition
NAME	CHROMAN, LARRY		1.2 NAME					
STREET ADDRESS	50 NORTH THIRD STREET		- 1	T ADDRESS				
CITY-ST-ZIP	FAIRFIELD IA 52556 S	DELETE	1.4 CITY - 5	ST-ZIP			Change	Addition
TITLE Name	HARTNETT, DANIEL J		2.1 TITLE 2.2 NAME				∏ Cusuffe	☐ Noomon
STREET ADDRESS	50 NORTH THIRD STREET		2.3 STREET	F ADDRESS				
CITY-ST-ZIP	FAIRFIELD IA 52556		2.3 STREET					
TITLE	1 C	DELETE	3.1 TITLE	07_1			Change	Addition
NAME	HARTNETT, CHRISTOPHER		3.2 NAME					
STREET ADDRESS	50 NORTH THIRD STREET		3.3 STREET	1 ADDRESS				
CITY-ST-ZIP	FAIRFIELD IA 52558		3.4. CITY-	ST-ZIP	<u> </u>		 -	
TITLE		. DECETE	4.1 TITLE				L Change	Addition
NAME			4 2 NAME					
STREET ADDRESS				f Address				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5 5.1 TITLE	31 - ZIP		·	Change	Addition
NAME			5.1 MAME				On., 94	L () y
STREET ADDRESS				T ADDRESS				
CITY-ST-7IP			5.4 CITY - S	ł				
TITLE		DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME	. ε		6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY+ST-ZIP			6.4 CITY - 9	ST - ZIP				

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 amount 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 exocute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or final statutes; an address

312- 984 6981

FILED

May 18 1998 8:00am

Secretary of State