FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G46109 (6)

1. Corporate Name
OUACHITA, INC.

Principal Place of Business
% DONALD E. SHORT
3745 SW 3RD PLACE
GAINESVILLE FL 32607

Mailing Address
% DONALD E. SHORT
3745 SW 3RD PLACE
GAINESVILLE FL 32607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/24/1983
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2322637 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SHORT, DONALD E.
3745 SW 3RD PLACE
GAINESVILLE FL 32607

10. Name and Address of New Registered Agent

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCCONNELL, DENNIS B.
STREET ADDRESS	3745 SW 3RD PLACE
CITY-ST-ZIP	GAINESVILLE FL
TITLE	VD
NAME	SHORT, DONALD
STREET ADDRESS	3745 SW 3RD PLACE
CITY-ST-ZIP	GAINESVILLE, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(k), 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: Dennis B. McConnell Dennis B. McConnell 4/29/95 904-392-7932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0033476 CP

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CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # G47045 (1)

1. Corporation Name
LINK TECHNOLOGIES, INC.

Principal Place of Business
% ALAN J. WERKSMAN
~~STE. 100 INTERCENTER~~ 160 SW 12TH AVENUE
DEERFIELD BEACH FL 33442

Mailing Address
% ALAN J. WERKSMAN
~~STE. 100 INTERCENTER~~ 160 SW 12TH AVENUE
DEERFIELD BEACH FL 33442

95 ... 25
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/01/1983
3a. Date of Last Report: 05/01/1994
4. FEI Number: 13-3187040 — 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 has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc: Suite 101B	27 Suite, Apt. #, etc: SUITE 101B
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

WERKSMAN, ALAN J.
~~STE. 100 INTERCENTER~~ SUITE 101B
160 SW 12TH AVENUE
DEERFIELD BEACH FL 33442-0102

10. Name and Address of New Registered Agent

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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	ROSENTHAL, LAWRENCE M	1.2 NAME	
STREET ADDRESS	10275 COLLINS AVE #1109	1.3 STREET ADDRESS	
CITY-ST-ZIP	BAL HARBOUR FL	1.4 CITY-ST-ZIP	
TITLE	~~ST~~	2.1 TITLE	☐ Change ☐ Addition
NAME	~~DICKSTEIN, MYRON~~	2.2 NAME	
STREET ADDRESS	~~175 E 74TH ST #6B~~	2.3 STREET ADDRESS	
CITY-ST-ZIP	~~NEW YORK NY~~	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	☑ Change ☐ Addition
NAME	BERNSTEIN, JOYCE S.	3.2 NAME	#1109
STREET ADDRESS	~~3385 PINEWALK DRIVE N.~~	3.3 STREET ADDRESS	10275 Collins Avenue
CITY-ST-ZIP	~~MARGATE FL~~	3.4 CITY-ST-ZIP	Bal Harbour, Fl. 33154
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] - L. M. Rosenthal 4/26/95 (305) 866-1719
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0437902 FP