

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 01, 2011
Secretary of State

DOCUMENT# N10000007362

Entity Name: VETERANS LINK UP, INC.**Current Principal Place of Business:**13615 SOUTH DIXIE HWY, SUITE 114-309
MIAMI, FL 33176 US**New Principal Place of Business:**11285 SW 211 STREET
SUITE 208
MIAMI, FL 33189 US**Current Mailing Address:**13615 SOUTH DIXIE HWY, SUITE 114-309
MIAMI, FL 33176 US**New Mailing Address:****FEI Number:** 27-2324134 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILEY, MARVA L ESQ
1100 NE 163RD ST, SUITE 100
N MIAMI BEACH, FL 33162 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:** P
Name: DAVIS, THOMAS B
Address: 413 NW 18TH ST
City-St-Zip: HOMESTEAD, FL 33030 US**Title:** D
Name: DOUGLAS-BARTOLONE, ALEXANDRIA
Address: 8037 PELICAN HARBOUR DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US**Title:** T
Name: MAS CANOSA, RAUL
Address: 810 VILABELLA AVENUE
City-St-Zip: CORAL GABLES, FL 33134 US**Title:** D
Name: KOVAC, ALEXANDER
Address: 14510 SW 108TH STREET
City-St-Zip: MIAMI, FL 33186 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALEXANDRIA DOUGLAS-BARTOLONE

D

09/01/2011

Electronic Signature of Signing Officer or Director

Date