

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90149 031 ***150.00

0511359

DOCUMENT # P00000012763

1. Entity Name

X-LINK INTERNATIONAL CORP.

Principal Place of Business

1312 W. SUGARLAND HWY
 CLEWISTON FL 33440

Mailing Address

1312 W. SUGARLAND HWY
 CLEWISTON FL 33440

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

Name

MATTHEW STANTON JR

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

109 Ridgewood Ave

City

Clewiston

FL

Zip Code

33440

8. 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

Signature, typed or printed name of registered agent and title if applicable.

Matthew Stanton Jr

(NOTE: Registered Agent signature required when reinstating)

DATE

1-4-01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	PIGNA, FRANCISCO	
STREET ADDRESS	20423 STATE RPAD 7 WY	
CITY - ST - ZIP	BOCA RATON FL 33498	
TITLE	D	<input type="checkbox"/> Delete
NAME	STANTON, MATTHEW JR	
STREET ADDRESS	109 BRIDGEWOOD AVENUE	
CITY - ST - ZIP	CLEWISTON FL 33440	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHANAHAN, MICHAEL	
STREET ADDRESS	P.O. BOX 1071 ROUTE 1	
CITY - ST - ZIP	CLEWISTON FL 33440	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Matthew Stanton Jr, Dir

Date

Daytime Phone #

1-4-01 813-983-8106

CR2E034 (10/00)