2008 FOR PROFIT CORPORATION

Mar 27, 2008 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P02000000433 GLOBAL LINK INTERNATIONAL CORP. Principal Place of Business Mailing Address 119 ROSEWOOD CIR. 119 ROSEWOOD CIR. JUPITER, FL 33456 JUPITER, FL 33456 CR2E034 (11/05) No Cha-P 03182008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 63-1157683 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAHAFFEE, RON DO NOT WRITE 119 ROSEWOOD CIR. JUPITER, FL 33456 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstaling) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be U00000872532 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees . After May 1, 2008 Fee will be \$550.00 04/19/08-80042-004 150.00 10. OFFICERS AND DIRECTORS TITLE MAHAFFEE, RON 119 ROSEWOOD CIR. STREET ADDRESS JUPITER, FL 33456 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MASAF STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental sport 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 true empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the changed, or on an attack

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED