

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000011461

Entity Name: INK LINK TATTOOS, INC.

**FILED**  
**Mar 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4738 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

4738 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33417

**New Mailing Address:**

FEI Number: 90-0008068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RESTIVO, SUZANNE  
2727 DANFORTH TERRACE  
WELLINGTON, FL 33414 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: RESTIVO, SUZANNE  
Address: 2727 DANFORTH TERRACE  
City-St-Zip: WELLINGTON, FL 33414

Title: PRES  
Name: RAINSBURG, CLARENCE  
Address: 2727 DANFORTH TERRACE  
City-St-Zip: WELLINGTON, FL 33414

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

SIGNATURE: SUZANNE RESTIVO

VP

03/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date