FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000025060 1. Entity Name

SALINKCOM, CORP.



FILED Feb 27, 2003 8:00 am Secretary of State

02-27-2003 90125 035 ***150.00

NOT WRITE IN THIS SPACE	

	DO NOT WE	RITE IN THIS	SPAC	E	30	001100		
2. Principal Place of Business 6595 NW 36 ST.			3. Mailing Address 6595 NW 36 ST.					
Suite, Apt. #, etc.		I	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
STE. 105 City & State		STE. 105 City & State			4. FEI Number Applied For			
			MIAMI, FL.		01-0644548		Not Applicable	
33166	_Country USA	33166	USA 5. C		5. Certificate of Status Desired		. 75 Additional Required	
				Name	7. Name and Address of Curre	7. Name and Address of Current Registered Agent		
DO NOT WRITE IN THIS SPACE				TANIA A. MAZZA-MARTINEZ				
			Street Address 782 NW		(P.O. Box Number is Not Acceptable) 42 AVE. STE. 637			
				City MIAMT		┌┖	Zip Code 3 3 1 2 6	
8. The above the obligation	named entity submits this stations of registered agent.	rement for the purpose of chang	ging its registere	d office or registe	ered agent, or both, in the State of F	lorida. I am famili	ar with, and accept	
SIGNATURE _	Signature, typed or printed name of regis	tered agent and title if applicable.	(NOTE: Registered	Agent signature require	ad when reinstating)	DATE		
Jar	nuary 1 - May 1 Fee is \$15 After May 1, Fee is \$550.0 Amended UBR is \$61.25	0.00 0.00			9. Election Campaign F Trust Fund Contribution	~ —	\$5.00 May Be Added to Fees	
the state of the s	Payable to Florida Depart	2D taken dekende beschilde de de Statis Bedeutstelle				J.1. C.	Added to rees	
10.	P	RS AND DIRECTORS	DILE					
NAME	FERNANDEZ, J	ORGE	NAME			建设,地方信息		
STREET ADDRESS CITY-ST-ZIP	6595 NW 36 S	T. STE. 105	STREE City - S	I ADDRESS				
TITLE	MIAMI, FL. 3	3166	TITLE	Parties of the Control of the Contro				
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	TADDRESS ST-ZIP				
TITLE NAME			TITLE					
STREET ADDRESS		_	NAME. STREET	ADDRESS				
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NAME STREET ADDRESS			NAME .	ADDRESS				
CITY-ST-ZIP			City-s	ANSETTE CONTRACTOR	er hat english at 2 days of the control of the control of the	ANGEL STEEL ST		

12. 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 embowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: