



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91054 032 \*\*\*150.00

<b>DOCUMENT # P02000049971</b> 1. Entity Name <b>MALINC INTERNATIONAL CORP.</b>																													
Principal Place of Business <b>321 JEFFERSON AVE. SUITE 8 MIAMI BEACH, FL 33139</b>			Mailing Address <b>321 JEFFERSON AVE. SUITE 8 MIAMI BEACH, FL 33139</b>																										
2. Principal Place of Business <b>6770 Indian Creek Dr. # 12-G Miami Beach FL 33141 USA</b>		3. Mailing Address <b>6770 Indian Creek Dr. # 12-G Miami Beach FL 33141 USA</b>		<div style="font-size: 1.2em; font-weight: bold;">24065919</div> 																									
4. FEI Number <b>03-0446741</b>		Applied For <input type="checkbox"/> Not Applicable		04302004 Chg-P CR2E034 (10/03)																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent <b>COELHO, ROBSON S 168 SE 1ST STREET SUITE 1108 MIAMI, FL 33131</b>																									
7. Name and Address of New Registered Agent Name <b>Priscila H. De Menezes</b> Street Address (P.O. Box Number is Not Acceptable) <b>6770 Indian Creek Dr. # 12-G</b> City <b>Miami Beach</b> <b>FL</b> Zip Code <b>33141</b>		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. SIGNATURE: <i>[Signature]</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)</small>																											
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PVS</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>DE MENEZES, PRISCILA M</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6770 INDIAN CREEK DRIVE #12G</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>MIAMI BEACH, FL 33141</td> <td></td> </tr> </table>			TITLE	PVS	<input type="checkbox"/> Delete	NAME	DE MENEZES, PRISCILA M		STREET ADDRESS	6770 INDIAN CREEK DRIVE #12G		CITY - ST - ZIP	MIAMI BEACH, FL 33141		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PSD</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Priscila H. De Menezes</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6770 Indian Creek Dr. #12-G</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Miami Beach FL 33141</td> <td></td> </tr> </table>			TITLE	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Priscila H. De Menezes		STREET ADDRESS	6770 Indian Creek Dr. #12-G		CITY - ST - ZIP	Miami Beach FL 33141	
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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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													
<small>Date Daytime Phone #</small>																													