2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State
04-23-2004 90227 042 ***150.00

DOCUMENT # P02000065941

1. Entity Name
CORPO LINK INTERNATIONAL INC.

#129. 94060858
Miami, Fl. 33126 (33126)

Principal Place of Business	Mailing Address
~~8248 NW 6 TERR #223~~ ~~MIAMI, FL~~ 33126	~~8248 NW 6 TERR #223~~ MIAMI, ~~FL 33126~~

2. Principal Place of Business	3. Mailing Address
8326 NW. 7 St.	8326 NW. 7 St
Suite, Apt. #, etc.: #129.	Suite, Apt. #, etc.: #129.
City & State: Miami, Fl.	City & State: Miami, Fl.
Zip: 33126 Country: USA.	Zip: 33126 Country: USA

03252004 Chg-P CR2E034 (10/03)

4. FEI Number: 02-0621792 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, JOEL
8248 NW 6 TERR #223
MIAMI, FL 33126

7. Name and Address of New Registered Agent

Name: Perez, Joel.
Street Address (P.O. Box Number is Not Acceptable): 8326 NW. 7 St. #129.
City: Miami, FL Zip Code: 33126.

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 [signature] 03/25/04.
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PEREZ, JOEL 8329 NW 7 STREET #129 MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PEREZ, JOEL 8326 NW. 7 Street #129 Miami, Fl, 33126.	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HERNANDEZ, MARIALUZ 8329 NW 7 STREET #129 MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hernandez, Marialuz 8326 NW. 7 St, #129. Miami, Fl, 33126.	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] Perez, Joel. 03/25/04, 786-2346886.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #