2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000066793

Title:

Name:

Address: City-St-Zip:

FILED Apr 30, 2003 Secretary of State

Entity Name: BUSINESS LINKS & SOLUTIONS INC. **Current Principal Place of Business: New Principal Place of Business:** 7501 NW 36TH ST. 7501 NW 36TH ST. MIAMI, FL 33166 MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 7501 NW 36TH ST. MIAMI, FL 33166 FEI Number: 56-2289920 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NINO, GERMAN SALMON, JUAN CARLOS 7501 NW 36TH ST. 7501 NW 36TH ST. MIAMI, FL 33166 MIAMI, FL 33166 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: JUAN CARLOS SALMON 04/30/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SALMON, JUAN CARLOS Name: Name: 7501 NW 36TH ST, Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: Title: () Delete () Change () Addition NINO, GERMAN Name: Name: 7501 NW 36TH ST, Address: Address: MIAMI, FL 33166 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MUTIS, MAURICIO Name: Name: 7501 NW 36TH ST. Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: () Delete Title: () Change () Addition ROBLEDO, ALEJANDRO Name: Name: Address: 7501 NW 36TH ST, Address: City-St-Zip: City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: JUAN CARLOS SALMON 04/30/2003

() Delete

ROSSI, ALEXANDRA

7501 NW 36TH ST.

MIAMI, FL 33166

() Change () Addition