2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# P05000041319

Entity Name: I - LINK SERVICES, CORP.

Current Principal Place of Business:

2470 SW 137 AVE
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

2470 SW 137 AVE
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-2548068 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAX DEFENSE CENTER, INC.
2350 W 84TH STREET
#18
HIALEAH, FL 33016 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: P ( ) Delete
Name: GARCIA, ALEJANDRO
Address: 2530 SW 153RD PASSAGE
City-St-Zip: MIAMI, FL 33185

Title: VP ( ) Delete
Name: SIMON, JACQUELINE
Address: 2530 SW 153RD PASSAGE
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GARCIA, ALEJANDRO
Address: 2470 SW 137 AVE
City-St-Zip: MIAMI, FL 33175

Title: VP (X) Change ( ) Addition
Name: SIMON, JACQUELINE
Address: 2470 SW 137 AVE
City-St-Zip: MIAMI, FL 33175

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: JACQUELINE SIMON VP 02/19/2009

Electronic Signature of Signing Officer or Director — Date