

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000108457

FILED
Sep 20, 2006
Secretary of State

Entity Name: AFROLINKS OF SOUTH FLORIDA INC.

Current Principal Place of Business:

780 N.E. 199 STREET UNIT E-205
MIAMI, FL 33179

New Principal Place of Business:

780 N.E. 199 STREET SUITE-205
MIAMI, FL 33179

Current Mailing Address:

780 N.E. 199 STREET UNIT E-205
MIAMI, FL 33179

New Mailing Address:

780 N.E. 199 STREET SUITE-205
MIAMI, FL 33179

FEI Number: 71-0987023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARNER, LATROD
780 N.E. 199 STREET UNIT E-205
MIAMI, FL 33179 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: LATROD GARNER

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GARNER, LATROD
Address: 780 N.E. 199 STREET UNIT E-205
City-St-Zip: MIAMI, FL 33179

Title: P () Delete
Name: WILSON, MARLON
Address: 780 N.E. 199 STREET UNIT E-205
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LATROD GARNER

Electronic Signature of Signing Officer or Director

VP

09/20/2006

Date