

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED
pg. 1 of 2

97 AUG 20 PM 4:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000006176 (0)

1. Corporation Name
UNIVERSAL DATA LINK, INC.



Principal Place of Business 6146 GEORGEWOOD LANE EAST JACKSONVILLE FL 32244	Mailing Address 6146 GEORGEWOOD LANE EAST JACKSONVILLE FL 32244
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 1945 CAUDLE ROAD 23 City & State MT. AIRY NC 24 Zip 27030 25 Country USA		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/21/1993		3a. Date of Last Report 07/18/1996	
				4. FEI Number 59-3161396		Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent KRIEGL, KERRY 6146 GEORGEWOOD LANE EAST JACKSONVILLE FL 32244				Agent 81 TIMOTHY KNIGHT 82 1814 PLEASANTVIEW DR. E. 83 84 JACKSONVILLE FL 85 32225	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE TIMOTHY KNIGHT 8-13-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PTD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	KRIEGL, KERRY		1.2 NAME				
STREET ADDRESS	6146 GEORGEWOOD LANE EAST		1.3 STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP				
TITLE	VSD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	WASILUS, DENISE L.		2.2 NAME				
STREET ADDRESS	P.O. BOX 454		2.3 STREET ADDRESS				
CITY-ST-ZIP	VALLEY VIEW PA		2.4 CITY-ST-ZIP				
TITLE	VD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	WASILUS, DENISE		3.2 NAME				
STREET ADDRESS	P.O. BOX 454 N/A		3.3 STREET ADDRESS				
CITY-ST-ZIP	VALLEY VIEW PA 17983		3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: KERRY L. KRIEGL 8-19-97 910-352-3966
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (4/97)

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19 August, 1997

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ATTN: Annual Reports

Dear Sir,

I am writing this letter in accordance with the instructions I received on 8 August, 1997 via phone conversation with the representative I reached at (904) 488-9000.

1. Place a "Stop Payment" on the original check.

Stopped payment on check #0421 dated 9 May, 1997 by phone call to Barnett Bank.

2. Send a new check for \$165.00 payable to the Division of Corporations.

Enclosed is check #0468 dated 19 August, 1997 in the amount of \$165.00.

3. Include a short note explaining the situation.

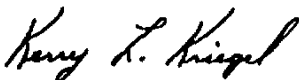
Universal Data Link, Inc. sent in the Corporation Report on 9 May, 1997 along with check #0421 in the amount of \$165.00 to cover the filing fee. To date, this has not been received by the State of Florida. I have no explanation as to where it is or what happened to it.

4. Mail the second report along with a check for \$165.00 via any traceable means to the:

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

The second report is being sent by FEDEX Corporation, tracking number 790004922171.

Thank you for all of your assistance in this matter.



Kerry L. Kriegel
President
Universal Data Link, Inc.