

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 12 1996 8:00 am
Secretary of State

DOCUMENT # P93000036238 (2)

1. Corporation Name

CROSSLINKS INCORPORATED



Principal Place of Business

Mailing Address

**5400 OCEAN BLVD.
#172
SARASOTA FL 34242**

**5400 OCEAN BLVD.
#172
SARASOTA FL 34242**

3. Date Incorporated or Qualified

05/17/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0420016

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

1858 RINGLING BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FLORIDA

Zip

34236

Country

USA

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ERTUGRUL, KENT
5400 OCEAN BLVD.
#172
SARASOTA FL 34242**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature, typed or printed name of registered agent and state (if applicable)

(NOTE: Registered Agent signature required when transferring)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**D
ERTUGRUL, KENT
5400 OCEAN BLVD., #172
SARASOTA FL 34242**

11. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

12. NAME
13. STREET ADDRESS
14. CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

21. TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

22. NAME
23. STREET ADDRESS
24. CITY - ST - ZIP

31. TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

32. NAME
33. STREET ADDRESS
34. CITY - ST - ZIP

41. TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

42. NAME
43. STREET ADDRESS
44. CITY - ST - ZIP

51. TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

52. NAME
53. STREET ADDRESS
54. CITY - ST - ZIP

61. TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/7/96

Date

Signature Block #

CR2E034 (3/96)