

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000072054

1. Entity Name

SOFILINK INCORPORATED

Principal Place of Business

6331 NW 87 AVE
MIAMI FL 33178
US

Mailing Address

6331 NW 87 AVE
MIAMI FL 33178-1626
US

2. Principal Place of Business

6810 N.W. 82 AVE.

Suite, Apt. #, etc.

3. Mailing Address

6810 N.W. 82 ave.

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33166

Country

USA

Zip

33166

Country

USA

4. FEI Number

65-0442480

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUILLEN, ISIDRO
10035 NW 44 TERRACE #305
MIAMI FL 33178

7. Name and Address of New Registered Agent

Name GUILLEN, ISIDRO J.

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

4728 N.W. 97 CT.

City

MIAMI

FL

Zip Code

33178

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/18/2000

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME GUILLEN, ISIDRO
STREET ADDRESS 10035 NW 44 TERR #305
CITY-ST-ZIP MIAMI FL

TITLE V ☐ Delete
NAME GUILLEN, RAIZA E
STREET ADDRESS 10035 NW 44 TERR #305
CITY-ST-ZIP MIAMI FL 33126

TITLE S ☐ Delete
NAME GUILLEN, NELSON, A
STREET ADDRESS 10035 NW 44 TERR #305
CITY-ST-ZIP MIAMI FL 33126

TITLE T ☐ Delete
NAME GUILLEN, RAIZA, C
STREET ADDRESS 10035 NW 44 TERR #305
CITY-ST-ZIP MIAMI FL 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Change ☐ Addition
NAME GUILLEN, ISIDRO
STREET ADDRESS 4728 N.W. 97 CT. MIAMI FL. 33178
CITY-ST-ZIP

TITLE V ☐ Change ☐ Addition
NAME GUILLEN, RAIZA E.
STREET ADDRESS 4728 N.W. 97 CT. MIAMI FL. 33178
CITY-ST-ZIP

TITLE S ☐ Change ☐ Addition
NAME GUILLEN, NELSON A.
STREET ADDRESS 4728 n.w. 97 CT. MIAMI FL. 33178
CITY-ST-ZIP

TITLE T ☐ Change ☐ Addition
NAME GUILLEN, RAIZA C.
STREET ADDRESS 4728 N.W. 97 CT. MIAMI FL. 33178
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90018 049 ***158.75

040314



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)

04/18/2000 305-593-0382