

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 23, 2001 8:00 am**
Secretary of State

04-23-2001 90001 007 ***158.75

DOCUMENT # P93000072054**1. Entity Name**
SOFILINK INCORPORATED**Principal Place of Business****6810 NW 82 AVE**
MIAMI FL 33166
US**Mailing Address****6810 NW 82 AVE**
MIAMI FL 33166
US**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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****7. Name and Address of New Registered Agent****GUILLEN, ISIDRO**
4728 NW 97 CT
MIAMI FL 33178**Name**
GUILLEN ISIDRO

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

11101 N.W. 43 RD. LANE**City**
MIAMI FLORIDA**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]* **ISIDRO J. GUILLEN**

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

(NOTE: Registered Agent signature required when reinstating)

4/15/01

DATE

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, 2001 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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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	PD	☐ Delete
NAME	GUILLEN, ISIDRO J	
STREET ADDRESS	4728 NW 97 CT	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	S	☐ Delete
NAME	GUILLEN, NELSON A	
STREET ADDRESS	4728 NW 97 CT	
CITY-ST-ZIP	MIAMI FL 33178	

TITLE	PD	☐ Change ☐ Addition
NAME	GUILLEN, ISIDRO	
STREET ADDRESS	11101 N.W. 43 RD. LANE	
CITY-ST-ZIP	MIAMI FLORIDA 33178	
TITLE	V	☐ Change ☐ Addition
NAME	GUILLEN, RAIZA E.	
STREET ADDRESS	11101 N.W. 43 RD. LANE	
CITY-ST-ZIP	MIAMI FLORIDA 33178	
TITLE	S	☐ Change ☐ Addition
NAME	GUILLEN, NELSON	
STREET ADDRESS	11101 N.W. 43 RD. LANE	
CITY-ST-ZIP	MIAMI FLORIDA 33178	
TITLE	T	☐ Change ☐ Addition
NAME	GUILLEN, RAIZA C.	
STREET ADDRESS	11038 N.W. 43 RD. TERRACE	
CITY-ST-ZIP	MIAMI FLORIDA 33178	
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]* **ISIDRO J. GUILLEN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)