

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

9/9/2003-90026-001-\$550.00-\$550.00

1/27

DOCUMENT # P95000013052

1. Entity Name
TRAVELINK NETWORK INC.



FILED

04 JAN 26 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
31 NE 3RD AVE
MIAMI FL 33132

Mailing Address
31 NE 3RD AVE
MIAMI FL 33132

2. Principal Place of Business
SAME AS ABOVE
Suite, Apt. #, etc.

3. Mailing Address
SAME AS ABOVE
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0564394

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75-Additional Fee Required

6. Name and Address of Current Registered Agent

GABARDA, MANNY
728 NE 2ND AVENUE
MIAMI FL 33132

7. Name and Address of New Registered Agent

Name JESUS INGUA
Street Address (P.O. Box Number is Not Acceptable)
~~401 NE 39 ST~~ 31 NE 3RD AVE
City MIAMI FL Zip Code 33132

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE JESUS INGUA
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GABARDA, MANNY	
STREET ADDRESS	728 NE 2ND AVENUE	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	RICARDO I. DY - PRESIDENT	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESIDENT	
STREET ADDRESS	2998 PETTIGREW CT.	
CITY-ST-ZIP	SAN JOSE, CA 95128	
TITLE	CEO	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIVINA I DY	
STREET ADDRESS	2998 PETTIGREW CT	
CITY-ST-ZIP	SAN JOSE, CA 95128	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/2/03
Date

(408) 210-7985
Daytime Phone #

CR2E034(4/03)

January 10, 2004

To: Kathy Ashton
Florida Department of State
Division of Corporations
Tallahassee, Florida 32314

Dear Kathy:

Attached are the paper works that I mailed last September 28, 2003 which I also mentioned to you on our phone conversation. Also attached is a check in the amount of \$150.00.

Your kind assistance on this matter is very much appreciated. Thank you.

Sincerely Yours,

Jesus Ingua