## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPÓRATIONS

## DOCUMENT # P95000015107 (2)

**POWERLINK SYSTEMS CORPORATION** 

Malling Address P.O. BOX 523086

Principal Place of Business 9280 S.W. 123RD COURT SUITE 8-308 MIAMI FL 33185 MIAMI FL 33152-3086 3a. Date of Last Report 3. Date Incorporated or Qualified 02/23/1995 03/25/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0641872 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. **\$8,75** Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Bo 23 Trust Fund Contribution Added to Fees 26 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yos ☐ No 24 25 29 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name ESTEVEZ, GERMAN 15705 MIAMI LAKEWAY N. 82 Street Address (P.O. Box Number is Not Acceptable) #210 MIAMI LAKES FL 33014 83 84 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, typed or printed name of registered agent and little if applicable (NOTE: Fix gistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Change Addition TITLE 1.1.101.6 FORTOU, LUIS NAME 1.2 NAME 9280 S.W. 123RD COURT #S-308 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 1.4,CITY- S1 - ZIP DELETE Change Addition TITLE 2.1 INUE ESTEVEZ, GERMAN NAME 2.2 NAME 15705 MIAMI LAKEWAY N. #210 STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 33014 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change 3.1 TO LE ■ Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY- ST- ZIP CITY-ST-ZIP DELFIE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 DITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 \$TREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE Change TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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 eath; 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.

4/24/97

(305) 449-0367

FILED

May 20 1997 8:00am

Secretary of State