2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P95000015710

Entity Name: INFO-LINK TECHNOLOGIES, INC.

Current Principal Place of Business:

6075 SUNSET DR
FL3
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

6075 SUNSET DR
FL3
MIAMI, FL 33143 US

New Mailing Address:

FEI Number: 65-0559842 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELLIS, JOHN M
13014 NEVADA STREET
CORAL GABLES, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ELLIS, JOHN M
Address: 13014 NEVADA STREET
City-St-Zip: CORAL GABLES, FL 33156

Title: D ( ) Delete
Name: DOOLITTLE, MARC
Address: 1001 MACE ROAD
City-St-Zip: MEBANE, NC 27302

Title: D ( ) Delete
Name: WELLS, JESSE L.
Address: 6009 SAN VICENTE ST
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: WELLS, JESSE L
Address: 6009 SAN VICENTE ST
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Change (X) Addition
Name: HOUSEWORTH, PETER
Address: 6001 ALMOND TER
City-St-Zip: PLANTATION, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN M ELLIS P 03/24/2009

Electronic Signature of Signing Officer or Director Date