

FILED

Apr 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 09 1997 8:00am Secretary of State	
DOCUMENT # P95000086397 1. Corporation Name Lynk Enterprises of South Florida					
Principal Place of Business 642 E. 24th St. Hialeah, FL 33013		Mailing Address SAME		3. Date Incorporated or Qualified 11/1/96	
2. Principal Place of Business 21		2a. Mailing Address 26		3a. Date of Last Report N/A	
State, Apt. #, etc.		Suite Apt. #, etc.		4. FEI Number 65-0633918	
City & State 22		City & State 27		Applied For Not Applicable	
Zip 23		Zip 28		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Country 25		Country 29		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
81 Name Concepcion Aguilar			82 Street Address (P.O., Box Number is Not Acceptable) 642 EAST 24th Street		
83			84 City Hialeah		
85 Zip Code 33013			DATE 3/31/97		
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: X Concepcion Aguilar (NOTE: Registered Agent signature required when re-registering)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
11 TITLE ☐ Change ☐ Addition					
12 NAME					
13 STREET ADDRESS					
14 CITY-ST-ZIP					
21 TITLE ☐ Change ☐ Addition					
22 NAME					
23 STREET ADDRESS					
24 CITY-ST-ZIP					
31 TITLE ☐ Change ☐ Addition					
32 NAME					
33 STREET ADDRESS					
34 CITY-ST-ZIP					
41 TITLE ☐ Change ☐ Addition					
42 NAME					
43 STREET ADDRESS					
44 CITY-ST-ZIP					
51 TITLE ☐ Change ☐ Addition					
52 NAME					
53 STREET ADDRESS					
54 CITY-ST-ZIP					
61 TITLE ☐ Change ☐ Addition					
62 NAME					
63 STREET ADDRESS					
64 CITY-ST-ZIP					
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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 included 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 by a director or officer 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.					
SIGNATURE: X Concepcion Aguilar DATE: 3/31/97 DAYTIME PHONE: 305-856-5227					