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

PROFIT CORPORATION ANNUAL REPORT

1998



DOCUMENT #

P96000033644 (1)

REŻLINK, INC.

Apr 28 1998 8:00am FLORIDA DEPARTMENT OF STATE Secretary of State Secretary of State **DIVISION OF CORPORATIONS**

4/20/98

813-321-6352

FILED

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Principal Place of Business Mailing Address					t sharedde me tonid bleis daint natier anni 1860 feind trees aret at bit Sibit side.	
2350-N 34TH STREET NORTH #201 2350-N 34TH STREET NORT						
ST. PETERSBURG FL 33713		ST. PETERSBURG FL 33713			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					04/15/1996	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			NOT APPLICABLE Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S Certificate of Status Desired S8.75 Additional	
22		27		···	Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	7:-		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the current year Intangible	
24	[25] g. Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
- ODI		in Hogistorea Agont	E	1 Name		
BRINKLEY, LINSTER E JR						
2350-N 34TH STREET NORTH #101 ST. PETERSBURG FL 33713]6	2 Street	et Address (P.O. Box Number is Not Acceptable)	
31.	FEIENSBUNG FL 337 IS		6	3		
				<u> </u>		
			8	4 City	El 85 Zip Code	
11. Pursuant t	o the provisions of Sections 607.050	02 and 607,1508, Florida Sta	tutes, the abo	ve-named	ed corporation submits this statement for the purpose of changing its registered	
office or re	egi ste red agent, or both, in the State	e of Florida. Such change wa	is authorized	by the cor	orporation's board of directors. I hereby accept the appointment as registered	
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature typed or printed name of registered ag	Put and title if applicable (N	IOTE: Registered A	gent signature	ure required when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		President : Change Addition	
NAME	LIN, FENG-LIANG		1.2 NAM	E		
STREET ADDRESS	2976 ELYSIUM WAY		1.3 STRE	et address	S	
CITY-ST-ZIP	CLEARWATER FL		1.4 City	-ST-ZIP		
TITLE	D	▼ DELETE	2 1 TiTLI		Change Addition	
NAME	DINICOLA , JOSEPH A		22 NAM			
STREET ADDRESS	15911 WILLOWDALE ROAD		2.3 STRE	ET ADDRESS	S	
CITY-ST-ZIP	TAMPA FL 33625		2.4 City	- ST - ZIP		
TITLE	D	DELETE	3.1 TITLE		Secretary Itreasure Change Addition	
NAME]	CHU, CHORNG-YI		3.2 NAM	E	,	
STREET ADDRESS	7974 SAILBOAT KEY BLVD.	# 304	3.3 STRE	ET ADDRESS	\$	
CITY-ST-ZIP	SOUTH PASADENA FL 3370		3.4 CITY	-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAN	E		
STREET ADDRESS			4.3 STRE	ET ADDRESS	3	
CITY-ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE	-	☐ DEŁETE	5.1 TITLE		Change Addition	
NAME			5.2 NAM			
STREET ADDRESS			5.3 STRE	et address	3	
CITY-ST-ZIP			5.4 CITY	ST - ZIP		
TITLE		☐ DELE TE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAM			
STREET ADDRESS			6.3 STRE	ET ADDRESS	;	
CITY-ST-ZIP			6.4 City			
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same tegal 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 12 or Block 13 ill-chaoged or on an attachnol with an address.						