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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600034631 (7)

TRULINK CORPORATION

Principal Place of Business Mailing Address 5227 45TH STREET EAST 5227 45TH STREET EAST BRADENTON FL 34203-4118 **BRADENTON FL 34203-4118** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1996 2. Principat Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0659422 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional K 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 THORESON, STEVEN 5227 45TH STREET EAST Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34203-4118** 83 В4 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 Stgnature, typed or printed name of registered agent and title it approable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. P/T/5/0 DELETE Addition 1.1 TITLE Change TITLE THORESON, STEVEN THORESON, STEVEN NAME 1.2 NAME 5227 45 STREET GAST 5227 45TH STREET EAST STREET ADDRESS 1.3 STREET ADDRESS 34203-4118 **BRADENTON FL** BRANGNYOW, FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE ŝtd 2.1 TITLE THORESON, COLLEEN NAME 2.2 NAME **5227 45TH STREET EAST** STREET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 1111 F Change Addition

14. Thereby 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 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 if changes, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

CICNATURE A Thur MANAGE

NAME

STREET ADDRESS

CITY-ST-7IP

ADN 28, 1998 941-756-2309

FILED

May 14 1998 8:00am

Secretary of State