


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

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000078302 (2)

1. Corporation Name
MAILINK, INC.



Principal Place of Business
**200 CRANDON BLVD.
SUITE 32405
KEY BISCAYNE FL 33149**

Mailing Address
**200 CRANDON BLVD.
SUITE 32405
KEY BISCAYNE FL 33149**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4201 AURORA ST		2a. Mailing Address 4201 AURORA ST		3. Date Incorporated or Qualified 09/20/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0715579	
City & State Coral Gables, FL		City & State CORAL GABLES		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33146		Zip 33146		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SOMMERKAMP, ALBERTO R 200 CRANDON BLVD. SUITE 32405 KEY BISCAYNE FL 33149				10. Name and Address of New Registered Agent			
81 Name LARRY VALDES				82 Street Address (P.O. Box Number is Not Acceptable) 4201 AURORA ST			
83				84 City Coral Gables			
85 State FL				86 Zip Code 33146			

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 *Larry Valdes* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input checked="" type="checkbox"/> DELETE		11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SOMMERKAMP, ALBERTO R			12 NAME			
STREET ADDRESS	200 CRANDON BLVD., SUITE 32405			13 STREET ADDRESS			
CITY-ST-ZIP	KEY BISCAYNE FL 33149			14 CITY-ST-ZIP			
TITLE	PRESIDENT	<input type="checkbox"/> DELETE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LARRY VALDES			22 NAME			
STREET ADDRESS	SAME AS ABOVE			23 STREET ADDRESS			
CITY-ST-ZIP	SAME AS ABOVE			24 CITY-ST-ZIP			
TITLE	SECRETARY	<input type="checkbox"/> DELETE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MARION VALDES			32 NAME			
STREET ADDRESS	SAME AS ABOVE			33 STREET ADDRESS			
CITY-ST-ZIP	SAME AS ABOVE			34 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

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 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 changed, or on an attachment with an address.

SIGNATURE *Larry Valdes* *President* 3/1/98 305-3730341

CR2E034 (10/97)