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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 01 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000094671 (0)

FUTURE LINK ENTERPRISE CORPORATION

Principal Place of Business Mailing Address 2141 MAIN STREET 2141 MAIN STREET SUITE F SUITE F DO NOT WRITE IN THIS SPACE **DUEDIN FL 34698 DUEDIN FL 34698** 3. Date Incorporated or Qualified <u>11/</u>15/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3411992 Not Applicable 21 26 Suite, Apt. #, etc. Sulte, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CHEN, KATHY 9405 CRABTREE LN 82 Street Address (P.O. Box Number is Not Acceptable) PORT RICHY FL 34668 83 84 City 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition Addition **VPAA** DELETE 1.1 TITLE UPCFO JEC ☐ Change TITLE MACDONALD, JOHN R. 2494 LAURELINED DRIVE ADTC SONG, DONGLE NAME 1.2 NAME 3924 QUIXOTE BLVD. #211 STREET ADDRESS 1.3 STREET ADDRESS CLEARUNTON FL 33765 **TAMPA FL 33613** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition **PCEO** 2.1 TITLE TITLE GOSS, D E NAME 2.2 NAME 7614 DANUBE DR. 2.3 STREET ADDRESS STREET ADDRESS **HUDSON FL 34667** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ___ Addition 3.1 TIRE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ☐ Addition 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address.

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