## SECOND-NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000101202 (5)

LINK PRINTING, INC.

97 SEP 11 PM 9:11

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address					a imational sim imite Attit Metri natit Amint 1/019 Mulét (1018 3/01) DBilo (101 40 6)				
1139 N FEDERAL HIGHWAY 1139 N FEDERAL HIGHWAY									
FT. LAUDERDALE FL 33304		FT. LAUDERDALE FL 33304				DO NOT WRITE IN THIS SPACE			
					Ì	3. Date Incorporated or Qualified	3a. Date of La	est Report	
					[	12/13/1996	NIA	7	
	lace of Business	2a. Mailing Address		1/		4. FEI Number 7/////	1	Applied For	
21 <b>] ] 45</b>	TING PRODUITS TINGS (1111)		OERA	L HIGH	NAY	15-0176/1/		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			/	5. Certificate of Status Desired	1 1	75 Additional se Regulred	
City & State	<u> </u>	City & State				6 Fination Compaign Financian			
23 FORT LANDER DALE FI. 28 FORT LANDER DAL			× 1/6		Election Campaign Financing     Trust Fund Contribution		.00 May Be ded to Fees		
Zip	Country	Zip 2 A	Col	17/ / /		8. This corporation owes or has pair			
24 333	304 25 USA	29 333 04	30	USH		Personal Property Tax due June :		<b>∭</b> No	
	9, Name and Address of Curren	t Registered Agent	- <del>L</del>			10. Name and Address of New Reg	Istered Agent		
FEINSTEIN, MICHAEL 8					81 Name				
000 F 140 OLAO DIAD				82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 710									
FORT LAUDERDALE FL 33301				83					
				<b>84</b> City			85	Zip Code	
								<u> </u>	
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was	authorize	d by the cor	poration	ration submits this statement for the pi in's board of directors. I hereby accep	the appointmen	ng its registered	
SIGNATURE	Signature, typed or printed name of registered age	ent and to cilf applicable (NC	it Registere	d Agent signatur	e rouuired	when reinsta; no	DATE		
12.	OFFICERS AND		13.		<u></u>	ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	TORS IN 12	
TITLE	P	☐ DELETE	1.1 T	TLE			Cha	nge 🔲 Addition	
NAME	HYERS, SARAH E		1.2 N	AME					
STREET ADDRESS	1139 N FEDERAL HIGHWAY		1.3 S	IREET ADDRESS	1145	S N VEDERAL HEGHYNAY			
CITY-ST-ZIP	FT. LAUDERDALE FL 33304		1.4 C	TY-ST-ZIP	KOR	TLAVOGROALE, P. 330	104		
TITLE	∖ VT	☐ DELLTE	2.1 Ti			5 N FEDERAL HEGHWAY TLANDEROALE, P.L. 333	<b>∠</b> Cha	nge 🔲 Addition	
NAME	HYERS, WILLIAM L		2.2 N	ame		A Grasen Harma			
STREET ADDRESS	1139 N FEDERAL HIGHWAY		2.3 S	IREE1 ADDRESS	1/49	IV. PAUENAL AZENJUA	2211		
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	Decer		ITY-ST-ZIP	KOR	5 N. FEOERAL HZGHWA TLAVOERDALE, F.L. S	<u> フングフ                                  </u>		
TITLE		DELETE	3.1 T	11.15	[	,	Cha	nge 🔲 Additio	
NAME			3.2 N			والمتالية والمتالية والمتالية المتالية			
STREET ADDRESS				TREET ADDRESS		44 (L)	2311115 22707 - 01	134	
CITY-ST-ZIP		DELETE	3.4. 0 4.1.7	ITY-ST-ZIP	<del> </del>	40000; -09/7 ****	<u>:3/3(""U)</u>	DUCTOUS AND	
TITLE		□1 pcct.tc	4.1 //			क करका व	.102. AA 019	'주주주구를 전망일다	
NAME CONTROL OF			1	iame Tréét addréss	1				
STREET ADDRESS									
CITY-ST-ZIP TITLE		☐ DELETE	4.4 C	11Y - S1 - ZIP TLE	<del> </del>		Cha	nge Addition	
NAME			5.2 N						
STREET ADDRESS				TREFT ADDRESS					
CITY-97-ZIP				ITY-SI-ZIP			^	. •	
TITLE		DELETE	6.1 T				) alul	nge	
NAME			6.2 N		ì	(	r. UT	a =	
				HIVIE				N' 1	
STREET ADDRESS						C	° alm	97	
STREET ADDRESS			6.3 S	HIVIT IREET ADDRESS ITY-ST-ZIP			'apu	97	

I do hereby certify that the information supplied with this filling 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.

pg.20f2

September 8, 1997

Florida Dept of License

Dear Sirs:

Enclosed you will find our tax return for the period requested. Please be advised that we did not receive the initial tax information as indicated in your packet. We were never located at 1139 N. Federal Highway and were not aware that as a new company we would be needing to file a return. It just happened that someone over there got your second notice and slid it under our door.

A call to your office by our accountant of this matter was made and we were instructed to submit this form along with a check in the amount of \$165 which is enclosed.

Please be sure that our address is corrected so as we will not be in this same position the next time it comes up.

Thank you

William L. Hyers for Link Printing