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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000044393

1. Corporation Name

TECHLINK COMMUNICATION CORPORATION

							i 1883/883 IIB (8111 18811 88111 88111 8811) ABIT ABIT ABIT ABIT ABIT BIT	. 11	<b>8 (3186</b> 1111 1981		
Principal Place of Business Mailing Address									• • • • • • • • • • • • • • • • • • • •		
1924 BYRAM D	RIVE	1924 BYRAM DRIVE	1924 BYRAM DRIVE								
CLEARWATER FL 34615		CLEARWATER FL 34615	CLEARWATER FL 34615				DO NOT WRITE IN THIS SPACE				
	<del>a Barrellando de la composição de la co</del>		بين ومنهدي		<u></u>	===	3 Date Incorporated or Qualifed			1.	
		•				_ [	· · · · · · · · · · · · · · · · · ·			1	
						05/15/1997 4. FEI Number Applied			┨		
2. Principal P	lace of Business	2a. Mailing Address					1 · · · · · · · · · · · · · · · · · · ·			-	
21		26					59-3456479 Not App			┨	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & Stat	9	City & State	City & State				6. Election Campaign Financing S5.00 May Be				
23		28	28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Zip Country				8. This corporation owes the current year Intangible				
24	25 29 30			Personal Property Tax.			☐ Yes ☐ No				
	9. Name and Address of Curre	nt Registered Agent					<ol><li>Name and Address of New Registered A</li></ol>	gent		]	
				81	Name				•		
BEEKHOO, JEFFERY										4	
1924 BYRAM DRIVE				82 Street Add			(P.O. Box Number is Not Acceptable)				
	ARWATER FL 34615			83						1	
· ·										╛	
				84	City			85 Zip	Code		
				Ш			L	banging i	te registered	┨.	
11Purouent	to the provisions of Sections 607:050 registered agent, or both, in the State	of Florida. Such change was	authorize	ρονε d by	the corpor	comora ration's	tion submits this statement for the purpose of c board of directors. I hereby accept the appoint	ment as	egistered	-	
agent. I a	m familiar with, and accept the obliga-	ations of, Section 607.0505, F	lorida Stat	utes	•						
SIGNATURE										1	
Signature, typed or printed name of registered agent and title if applicable.				Registered Agent signature required				DIDECT	ODC IN 12	- 1	
12		ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS AND	Change		: 1	
TITLE	D	☐ DELETE		1.1 TITLE				Onlange	, Диавиан		
NAME	BEEKHOO, JEFFERY		1.2 NAME				•			1 8	
STREET ADDRESS	1924 BYRAM DRIVE		1.3 STREET ADDRESS							8	
CITY-ST-ZIP	CLEARWATER FL 34615				4 CITY-ST-ZIP					-{ }	
TITLE	D DELETE		2.1 T	2.1 TITLE				Change	Addition	1	
NAME	HAULK, CARL N			2.2 NAME							
STREET ADDRESS	1004 00044 0005			2.3 STREET ADDRESS							
CITY-ST-ZIP	CLEARWATER FL 34615			2.4 CITY-ST-ZIP						╛	
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CITY-ST-ZIP		4.4		CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·			_	
TITLE				TITLE				☐ Change	Addition	, <u> </u>	
NAME			5.2 N	AME				-			
STREET ADDRESS			5.3 S	5.3 STREET							
CITY-ST-ZIP		5.4 CITY-ST-ZIP									
TITLE	3 25 5 4 1 4	☐ DELETE	6.1 T					☐ Change	Addition	1	
	1 76	<del>-</del>									

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90049 023 \*\*\*158.75