

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

02 OCT 15 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000044933**

1. Corporation Name
INFOLINK INFORMATION SERVICES, INC

2. Principal Office Address
2400 E. LAS OLAS BLVD.

3. Mailing Office Address
2400 E. LAS OLAS BLVD.

Suite, Apt. #, etc.
Suite 268

Suite/Apt. #, etc.
Suite 268

City & State
FT. LAUDERDALE, FL

City & State
FT. LAUDERDALE, FL

Zip Country
33301 BROWARD

Zip Country
33301 BROWARD

4. Date Incorporated or Qualified
To Do Business in Florida **5/19/1997**

5. FEI Number **650 725 725**
Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name **PRIEUR J. LEARY III**
Street Address (P.O. Box Number is Not Acceptable) **2400 E. LAS OLAS BLVD** **200008354032--6**
Suite, Apt. #, Etc. **Suite 268** **-10/14/02--0102--001**
City **FT. LAUDERDALE** *****150.00 ***150.00**
State Zip Code
FL 33301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent **[Signature]** Date **10/10/02**
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer, and/or Director	City / State / Zip
D	PRIEUR J. LEARY III	2400 E. LAS OLAS BLVD. SUITE 268	FT. LAUDERDALE, FL 33301
VPD	PRIEUR J. LEARY JR.	2400 E. LAS OLAS BLVD. SUITE 268	FT. LAUDERDALE, FL 33301

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: **[Signature]** **PRIEUR J. LEARY III** 10/10/02 305-324-1616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/01)

25-10/15/02



VIA COURIER - FEDERAL EXPRESS

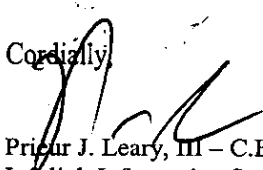
October 11, 2002

Florida Department of State
Division of Corporations
Reinstatement Division
409 East Gaines Street
Tallahassee, FL 32399
RE: Infolink Information Services, Inc.

To Whom It May Concern:

This letter is regards to Infolink Information Services, Inc. (FEI-650725725), incorporated with the State of Florida on May 26, 2000, unexpected dissolution for failing to submit its annual renewal. Infolink Information Services, Inc. did not receive the Uniform Business Report or any other filing forms or notification regarding its renewal. Attached you will find our Corporation Reinstatement form and a check in the amount of \$158.75 for our reinstatement fees and fee for our Certificate of Status. Please do not hesitate to contact me directly regarding this issue.

Cordially,


Pricur J. Leary, III - C.E.O.
Infolink Information Services
2400 E. Las Olas Blvd. #268
Fort Lauderdale, FL 33301-1529
305-324-1616 Office
305-324-1919 Fax
305-776-5343 Mobile
odiaz@infolink.com
www.infolink.com

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