

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000073647

**FILED**  
**Oct 07, 2005**  
**Secretary of State**

**Entity Name:** INTER\*LINK TECHNOLOGY SOLUTIONS, INC.

**Current Principal Place of Business:**

4606 S. CLYDE MORRIS BLVD  
SUITE 2D  
PORT ORANGE, FL 32129 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 291241  
DAYTONA BEACH, FL 321291241

**New Mailing Address:**

4606 S. CLYDE MORRIS BLVD  
SUITE 2D  
PORT ORANGE, FL 32129

**FEI Number:** 59-3465718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOULD, JOHN S  
4606 S. CLYDE MORRIS BLVD.  
SUITE 2-D  
PORT ORANGE, FL 32129 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** JOHN S GOULD

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PT ( ) Delete  
**Name:** GOULD, JOHN S  
**Address:** 4606 S. CLYDE MORRIS BLVD. - STE.#2D  
**City-St-Zip:** DAYTONA, FL 32129

**Title:** SV ( ) Delete  
**Name:** GOULD, JOHN S  
**Address:** 4606 S. CLYDE MORRIS BLVD. - STE.#2D  
**City-St-Zip:** DAYTONA, FL 32129

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PT (X) Change ( ) Addition  
**Name:** GOULD, JOHN S  
**Address:** 4606 S. CLYDE MORRIS BLVD. - STE.#2D  
**City-St-Zip:** PORT ORANGE, FL 32129

**Title:** SV (X) Change ( ) Addition  
**Name:** GOULD, JOHN S  
**Address:** 4606 S. CLYDE MORRIS BLVD. - STE.#2D  
**City-St-Zip:** PORT ORANGE, FL 32129

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** JOHN S GOULD

Electronic Signature of Signing Officer or Director

MR.

10/07/2005

Date