

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000014632

FILED
Sep 02, 2004
Secretary of State

Entity Name: LINK PARTNERS, INC.

Current Principal Place of Business:

2811 VILLAGE BOULEVARD
UNIT 301
W PALM BEACH, FL 33409

New Principal Place of Business:

2724 AUSTRALIAN, BLDG. 2
WEST PALM BEACH, FL 33407 US

Current Mailing Address:

2811 VILLAGE BOULEVARD
UNIT 301
W PALM BEACH, FL 33409

New Mailing Address:

2811 VILLAGE BOULEVARD
UNIT 301
W PALM BEACH, FL 33409 US

FEI Number: 65-0928851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNER, SUZANNE
2811 VILLAGE BLVD #301
WEST PALM BEACH, FL 33409 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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TURNER, SUZANNE
Address: 2811 VILLAGE BOULEVARD UNIT 301
City-St-Zip: W PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUZANNE TURNER

PRES

09/02/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date