

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000033553

1. Entity Name

TERRA-LINK TECHNOLOGIES INTERNATIONAL, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90331 035 ***150.00

Principal Place of Business

Mailing Address

2550 STAG RUN BOULEVARD
 SUITE 816
 CLEARWATER FL 33765

2550 STAG RUN BOULEVARD
 SUITE 816
 CLEARWATER FL 33765-1842

2. Principal Place of Business

7788 43rd St. N.

3. Mailing Address

P.O. Box 1175

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
 Pinellas Park, FL.

City & State
 Pinellas Park, FL.

4. FEI Number

59-3570804

Applied For

Not Applicable

Zip
 33781

Country
 U.S.A.

Zip
 33780-1175

Country
 U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
 NAME SADLER, ROY D
 STREET ADDRESS 2550 STAG RUN BOULEVARD
 CITY-ST-ZIP CLEARWATER FL 33765

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE STD ☐ Delete
 NAME SADLER, FRANKA L
 STREET ADDRESS 2550 STAG RUN BOULEVARD
 CITY-ST-ZIP CLEARWATER FL 33765

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Roy D. Sadler
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roy D. Sadler

4/27/00

Date

727-545-3152

Daytime Phone #

CR2E034 (9/99)