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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # \$95414

(6)

WORLDLINK PROPERTIES, INC.

FILED

Apr 23 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address				{		
					į.	
			9918 ORCHARD HILLS RD			
INVERNESS FL 34450 US		JACKSONVILLE FL 32256		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					11/19/1991	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3113331	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Regulred	
City & State		City & State		6. Election Campaign Financing		
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country Zip		Country		8. This corporation owes or has paid the	
24	25		30		Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Current				10. Name and Address of New Registers	
HAMMAKER, SAEKO B1 Namo						
9918 ORCHARD HILLS RD			-	-	/	
	CKSONVILLE FL 32256		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
Ų.	THE TENTE OF THE PERSON		83	 		
			84	City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statutes	the show	e-named o		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agen	ONCATE E	Paristored As	ant nionature en	iquired when reinstating) DATE	
12.	OFFICERS AND		13.	our aiduatore re	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSTD	DELETE	1.1 TITLE		7.55.110,10,014.110.110.110.110.110.110.110.110.110.	Change Addition
NAME	HIRUKAWA, NOBUYOSHI		1.2 NAME			
STREET ADDRESS	B O 44 VANALIOTO MICH		1.3 STREET	Annaece		
CITY-ST-ZIP	TAKARAZUKA, HYOGO		1.4 CITY- S			
TITLE	VP	DELETE	2.1 TITLE	1-211		Change Addition
NAME	HIRAKAWA, YASUYUKI		2.2 NAME			
STREET ADDRESS	8-2-11 YAMAMOTO-NISHI			ADDOCCO		
	TAKARAZUKA, HYOGO		2.3 STREET			
CITY-ST-ZIP TITLE	VP	DELETE	2. 4 CITY-:	SI-BP		Change Addition
NAME	HIRUKAWA, TAKASHI	□ perrit	1			□ crouge □ Addition
	\$-2-11 YAMAMOTO-NISHI		3.2 NAME			
STREET ADORESS	TAKARAZUKA, HYOGO		3.3 STREET ADDRESS			
CITY-ST-ZIP	VPD	DELETE	3.4. CITY - 3	ST-ZIP		Character 1 4 4 4 9 9
TITLE	HIRUKAWA, MICHIKO	□ DETEIE	4.1 TITLE			Change Addition
NAME	3-2-11 YAMAMOTO-NISHI		4. 2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP	TAKARAZUKA, HYOGO	T DELETE	4.4 CITY - S	T-ZIP		
TITLE		☐ DELETÉ	5.1 TITLE			Change
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T- ZIP		
TITLE		DELET e	6.1 TITLE			☐ Change ☐ Addition
4111.00			5 5 114445			ľ

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 armual 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 trusted 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.

6.3 STREET ADDRESS

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