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

PROFIT FLORIDA DEPARTMENT OF STATE Jun 16, 1999 8:00 am CORPORATION Katherine Harris ANNUAL REPORT **Secretary of State** Secretary of State 1999 DIVISION OF CORPORATIONS 06-16-1999 90014 006 ***550.00 DOCUMENT # V42382 v MARKET LINK SERVICES, INC. D/B/A SERU CORP

Address Mailing Address Principal Place of Business 1205 Sarah Street Ste 111 DO NOT WRITE IN THIS SPACE Longwood, FL 32750 3. Date Incorporated or Qualifed 92 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3130974 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country-Ζiρ Country 8. This corporation owes the current year Intangible 24 25 29 30 Personal Property Tax. S⊒√io 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Robert A. Popadite 4 Street Address (P.O. Box Number is Not Acceptable) 1889 Berkeley Ct. Maitland, FL 32751 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRESIDENT, WIRECTOR TITLE DELETE 11TITLE Change Addition Robert A. Popaditely NAME 1.2 NAME 1889 Berkeley Ct. STREET ADDRESS 1.3 STREET ADDRESS Maitland, FL 32751 CITY-ST-ZIP 1.4 CITY-ST-ZIP scott Popaditch 27 Cherry Lake Way DELETE TITLE 2.1 TITLE Addition Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3 1 TITLE ☐ Change Addition Gwendalyn M. Popaditch 1527 Cherry Lake way NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE Change Addition 4.1 TITLE SuzAnne Popaditely NAME 4.2 NAME Bonkeley Ct. STREET ADDRESS 4.3 STREET ADDRESS Maitland, FL 32751 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE John A. Pascarella 5.2 NAME NAME Andinga Rd 5.3 STREET ADDRESS STREET ADDRESS 3 2 70 8 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE TITLE ☐ Change ☐ Addition

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 suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: M. DEAN HALL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING O

M. Dean Hall

1878 Bristal Ct.

NAME

STREET ADDRESS

AME OF SIGNING OFFICER OR DIRECTOR

3295/

6/10/99 407 834-7378 Ext 113