

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000033644

Entity Name: REZLINK INTERNATIONAL, INC.**Current Principal Place of Business:**6 SYLVAN WAY
PARSIPPANY, NJ 07054**Current Mailing Address:**6 SYLVAN WAY
PARSIPPANY, NJ 07054 US**FEI Number:** 59-3592430**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*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**Officer/Director Detail :**

Title	SECRETARY
Name	KOEPKE, BRYON L
Address	6 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	VP
Name	BOUTA, ROBERT F
Address	6 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	DIRECTOR, CEO
Name	DE SHON, LARRY DEAN
Address	6 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	ASST. SECRETARY
Name	GALLAGHER, PAUL
Address	6 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	DIRECTOR
Name	FERRARO, JOSEPH ANTHONY
Address	6 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

Title	CFO
Name	MARTINS, IZILDA P
Address	6 SYLVAN WAY
City-State-Zip:	PARSIPPANY NJ 07054

I hereby 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 all other like empowered.

SIGNATURE: BRYON L KOEPKE**SECRETARY****04/27/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date