

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000103302

Entity Name: DISTRIBUTOR'S LINK, INC.

Current Principal Place of Business:

4297 CORPORATE SQUARE N
NAPLES, FL 34104

Current Mailing Address:

4297 CORPORATE SQUARE N
NAPLES, FL 34104

FEI Number: 65-0721347

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COAR, LEO
4297 CORPORATE SQUARE N
NAPLES, FL 34104 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	P	Title	DIRECTOR
Name	COAR, LEO	Name	COAR, PALMYRA A
Address	4297 CORPORATE SQUARE N	Address	4297 CORPORATE SQUARE N
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104

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: LEO COAR

PRES

04/25/2017

Electronic Signature of Signing Officer/Director Detail

Date