2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT #F77730 1. Entity Name 03-26-2007 90066 016 ***150.00 TOPLIGHT INVESTMENTS, INC. Principal Place of Business Mailing Address 2853 EXECUTIVE PARK DR PO BOX 266366 SUITE 202 WESTON, FL 33326 WESTON, FL 33331 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142007 Chg-P CR2E034 (12/06) City & State City & State Applied For 4. FEI Number 59-2197841 Not Applicable Zin Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nama GARCIA, BLANCA Street Address (P.O. Box Number is Not Acceptable) 2853 EXECUTIVE PARK DR STE 202 WESTON, FL 33331 City 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. I am familiar with, and accept the obligations of registered agent SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DΡ TITLE ☐ Deleta TITLE ☐ Change Addition NAME FINOL, ANDRES NAME STREET ADDRESS 2853 EXECUTIVE PK DR STE 202 STREET ADDRESS CITY-ST-ZIP WESTON, FL 33331 CITY-ST-7IP VPS VP Garcia, Blança TITLE ☐ Delete TITLE Change Addition GARCIA, BLANCA NAME NAME 2853 Executive Park Dr. Ste.202 STREET ADDRESS 2853 EXECUTIVE PK DR STE 202 STREET ADDRESS Weston, FL 33331 CITY-ST-ZIP WESTON, FL 33331 CATY-ST-ZIP ecretary Secretary **I**MF ☐ Delete TITLE Change XXAddition Finol, Mariana Finol, Mariana NAME NAME STREET ADDRESS 2853 Executive Park Dr. Ste. 2 STREET ADDRESS 2853 Executive Park Dr. Suite 202 CITY-ST-ZIP Weston, FL 33331 CETY-ST-7IP Weston, FL 33331 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Jania

SIGNATURE:

FILED

3/23/07 954-217-8680 Date Dayline Phone 9

Mar 26, 2007 8:00 am