

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000705

Entity Name: AMTOPP CORPORATION

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

9 PEACH TREE HILL ROAD
LIVINGSTON, NJ 07039

New Principal Place of Business:

Current Mailing Address:

9 PEACH TREE HILL ROAD
LIVINGSTON, NJ 07039

New Mailing Address:

FEI Number: 22-3103903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HSIEH, HOMER
Address: 9 PEACH TREE HILL ROAD
City-St-Zip: LIVINGSTON, NJ

Title: D () Delete
Name: WANG, Y.C.
Address: 9 PEACH TREE HILL ROAD
City-St-Zip: LIVINGSTON, NJ 07039

Title: S () Delete
Name: NIGHTINGALE, ALICE
Address: 9 PEACH TREE HILL ROAD
City-St-Zip: LIVINGSTON, NJ

Title: VT () Delete
Name: WANG, ROBERT
Address: 9 PEACH TREE HILL ROAD
City-St-Zip: LIVINGSTON, NJ 07039

Title: D () Delete
Name: WANG, SUSAN
Address: 9 PEACH TREE HILL ROAD
City-St-Zip: LIVINGSTON, NJ

Title: CD () Delete
Name: YOUNG, JOHN
Address: 9 PEACH TREE HILL ROAD
City-St-Zip: LIVINGSTON, NJ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT WANG

VT

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date