2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000010035

Entity Name: TOPS INTERNATIONAL LTD. CO.

Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 39 HEATHER COVE DR 39 HEATHER COVE DR BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33436 US **Current Mailing Address: New Mailing Address:** 39 HEATHER COVE DR 39 HEATHER COVE DR BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33436 US FEI Number: 65-1130832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RODRIGUEZ, ARLENIA 39 HEATHER COVE DR BOYNTON BEACH, FL 33436 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 **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** () Delete () Change (X) Addition MENDOZA, CLEMENT R VP Name: Name: Address: Address: 337 KOTTY PINE CIRCLE City-St-Zip: City-St-Zip: GREENACRES, FL 33463 US Title: Title: MGR () Change (X) Addition () Delete Name: Name: MENDOZA, CLEMENT R VP Address: Address: 337 KNOTTY PINE CIRCLE City-St-Zip: City-St-Zip: GREENACRES, FL 33436 US Title: () Delete Title: MGR () Change (X) Addition MENDOZA, CLEMENT R VP Name: Name: 337 KNOTTY PINE CIRCLE Address: Address: City-St-Zip: City-St-Zip: GREENACRES, FL 33463 US Title: () Delete Title: MGR () Change (X) Addition MENDOZA, CLEMENT R VP Name: Name: 337 KNOTTY PINE CIRCLE Address: Address: GREENACRES, FL 33463 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition MENDOZA, CLEMENT R VP Name: Name: 337 KOTTY PINE CIRCLE Address: Address: City-St-Zip: City-St-Zip: GREENACRES, FL 33463 US Title: () Delete Title: () Change (X) Addition MENDOZA, CLEMENT R VP Name: Name: Address: Address: 337 KNOTTY PINE CIRCLE GREENACRES, FL 33463 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CLEMENT R. MENDOZA MGR 04/29/2002