

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097000

Entity Name: VP TOP CONDO LLC.

FILED  
Apr 17, 2009  
Secretary of State

**Current Principal Place of Business:**

16226 SW 27TH ST.  
MIRAMAR, FL 33027 US

**New Principal Place of Business:**

**Current Mailing Address:**

18501 PINES BLVD, STE 201  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

FEI Number: 20-3559569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VALLE, SANDRA M  
15677 SW 53 STREET  
MIRAMAR, FL 33027 US

**Name and Address of New Registered Agent:**

VALLE, SANDRA M  
16226 SW 27TH ST.  
MIRAMAR, FL 33027 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: SANDRA M VALLE

04/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VALLE, SANDRA M  
Address: 15677 SW 53 STREET  
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM ( ) Delete  
Name: PERTUZ, DORIAN  
Address: 15677 SW 53 ST.  
City-St-Zip: MIRAMAR, FL 33027 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VALLE, SANDRA M  
Address: 16226 SW 27TH ST.  
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM (X) Change ( ) Addition  
Name: PERTUZ, DORIAN  
Address: 16226 SW 27TH ST.  
City-St-Zip: MIRAMAR, FL 33027 US

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 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: SANDRA M VALLE

MGRM

04/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date