

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088381

FILED
Mar 21, 2007
Secretary of State

Entity Name: THE FINANCIAL \$TOP, LLC

Current Principal Place of Business:

2112 N. UNIVERSITY DR.
SUNRISE, FL 33322

New Principal Place of Business:

2112 N. UNIVERSITY DRIVE
SUNRISE, FL 33322

Current Mailing Address:

2112 N. UNIVERSITY DR.
SUNRISE, FL 33322

New Mailing Address:

2112 N. UNIVERSITY DRIVE
SUNRISE, FL 33322

FEI Number: 30-0380927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, WILFREDO W
16811 NE 15TH AVENUE
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

LEWIS, WILFREDO W
2112 N UNIVERSITY DRIVE
SUNRISE, FL 33322 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: WILFREDO W. LEWIS

03/21/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CORREA-LEWIS, LOURDES G
Address: 16811 NE 15TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: LEWIS, WILFREDO W
Address: 2112 N UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322

Title: MGR () Change (X) Addition
Name: CORREA-LEWIS, LOURDES G
Address: 2112 N UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the 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: WILFREDO W. LEWIS

MM

03/21/2007

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