

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 03, 2001 8:00 am**  
**Secretary of State**

07-03-2001 90001 027 \*\*\*150.00

**DOCUMENT # P00000049667**

1. Entity Name  
**TOP TRECK, INC.**



Principal Place of Business  
**6955 NW 52 STREET STE 201 D**  
**MIAMI FL 33166**

Mailing Address  
**6955 NW 52 STREET STE 201 D**  
**MIAMI FL 33166**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address  
**6373 Bay Club drive**

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
**Apt. # 4**

City & State

City & State  
**Pt. Lauderdale FL**

4. FEI Number

**65-1024184**

Applied For

Not Applicable

Zip

Country

Zip  
**33308**

Country

**US**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MASSO, ALFREDO**  
**6955 NW 52 STREET STE 201 D**  
**MIAMI FL 33166**

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
~~After MAY-15-2001 Fee will be \$550.00~~  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPV</b> <b>MASSO, ALFREDO</b> <b>6955 NW 52 STREET STE 201 D</b> <b>MIAMI FL 33166</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST</b> <b>MASSO, ALFREDO</b> <b>6955 NW 52 STREET STE 201 D</b> <b>MIAMI FL 33166</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alfredo Masso **ALFREDO MASSO** **6/25/01** **305-7789846**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachments

June 25th, 2001

# P 00000049667  
554310

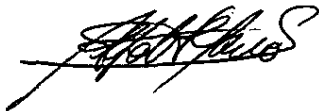
Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32305-1500

**RE: Top Treck, Inc. FEI Number 65-1024184**

Please enclosed check number 5060 for \$150.00 for the UBR.

The Uniform Business Report was received last week due to an error by the postal carrier. The envelope has a miss delivered note. I immediately contacted a customer service representative and she advised that I send in the check for \$150.00 along with an explanation letter.

Sincerely,



Alfredo Massó  
Top Treck, Inc.