2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P00000100980

1. Entity Name

TOP MODERN, INC.

FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90238 040 ***150.00

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Principal Place of Business 7902 N.W. 36TH STREET SUITE 211 MIAMI FL 33166		7902 N.V Suite 21	Mailing Address 7902 N.W. 36TH STREET SUITE 211 MIAMI FL 33166			11	ISSIESI eli Abin	88 (() 88 () 46 ()	1 23(8) (18)(881U 8811E (81	N. 18411 8811 1881
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State		City & S	City & State			4. FEI No	ımber 65-	1054248			Applied For Not Applicable
Zip	Country	Zip	Zip Coun		try		cate of Status	Desired		\$8.75 Ac Fee Requir	dditional
	6. Name and Address of Cu	rrent Registered A	gent			7. Name	and Address	s of New Re	aistered .		
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	V. 16TH STREET										
Fi. LAUD	DERDALE FL 33311-4132			79	102	NW	36 8	reet		2//	
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8. The above	e named entity submits this statem	ent for the purpose	of changing its regis	- / I	1 Qx	1,5			<u>FL</u>	1 2 3	. / /
the obliga	e named entity submits this statem tions of registered agent.	cit for the purpose	or changing its regis	tered office or t	registered	d agent, or	both, in the S	State of Flori	da. I am t	amiliar with	, and accept
SIGNATURE	Signature, typed or printed name of registered										
			i. (NOTE: Regis:	tered Agent signature	e required w	hen reinstating)		DATE		
F Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550	0.00				9.	Election Car			\$5.0	O May Be
Make Check	k Payable to Florida Departme	nt of State				1	Trust Fund C	Contribution.			d to Fees
10.	OFFICERS	AND DIRECTORS	1	1.		ADDITIO	VS/CHANGE	S TO OFFIC	ERS AND	DIRECTOR	C (A) 11
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12. 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 10 or Block 11 if

SIGNATURE: <u>«</u>

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/13/03 D

Daytime Phone #

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