

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90169 004 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000092419

1. Entity Name
TOP FLIGHT COMMUNICATIONS INC.



Principal Place of Business
**48 CONCORD LANE
PALM HARBOR, FL 34684**

Mailing Address
**48 CONCORD LANE
PALM HARBOR, FL 34684**



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
58-3744962

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

5. Name and Address of Current Registered Agent

**RUSSO, JOSEPH J JR.
48 CONCORD LANE
PALM HARBOR, FL 34684**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$560.00
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE **PS** ☐ Delete
NAME **RUSSO, JOSEPH J III**
STREET ADDRESS **13118 72ND TERRACE NORTH**
CITY-ST-ZIP **SEMINOLE, FL 33776**

TITLE **VT** ☐ Delete
NAME **RUSSO, JOSEPH J JR.**
STREET ADDRESS **48 CONCORD LANE**
CITY-ST-ZIP **PALM HARBOR, FL 34684**

TITLE ☐ Delete
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CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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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)(1), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joe Russo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date

2-19-03

Daytime Phone #

727-639-1010

CR2E034 (10/02)