## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

DOCUMENT # P020000 322.82  1. copposition Name Topend Performance Products, Inc.  2. Principal Office #drivess 4406 NE 11th Ave. 4704 NE 11th Ave. 4704 NE 11th Ave. 50te, Apt. R. etc.  7. Solve, Apt. R. etc.  8. Data Incapposated of Country 7 to De Bullinese on Pirotine 3/25/2002  Ft. Lauderdale, Ft.  10. 4 State 7. Name and Address of Country 8 33334  10SA  7. Name and Address of Country 8 State 8. Country 9 State 10 Country	CORPORATION REINSTATEMENT  FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS					FILED  05 APR 12 AM 11:52				
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  4. Date Incorporated or Qualified To De Busness in Florids 3/25/2002  5. FEI Number 10-0824200  Routely 33334  Country USA  7. Name and Address of Current Registered Agent  Name Rafael Lebron  Size Address P.O. Box Number is Not Acceptable)  7. Name and Address of Current Registered Agent  State P.L. 33334  8. Libeling appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.6503, F.S. Signature of Registered Agent  Refaile Lebron  8. Libeling appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.6503, F.S. Signature of Registered Agent  Refaile Lebron  9. Names and Street Addresses of Each Officer and/or Directors  Name of Officers and/or Directors  Officer and/or Directors  Pres. Rafael Lebron  1011 NW 93rd Terrace  Pres. Rafael Lebron  1011 NW 93rd Terrace  Plantation, F.L. 33322  10. Loxahatchee, F.L. 33470  10. Lordry field ann an officer or director or the receiver or house engineered the application as provided for in chapter 607 or 617, F.S. I further certify that when filling this invisual composition on paid and the necessities of this control on paid and the necessities of the requirements of section 607.0001, F.S. That all fees owned by the composition in the and accurate, agent my signature shall have the same logal effect as if made under cath.	1. Corpora	ition Name	_	-			SECRETA TALLAHA	ISSEË, FLORIDA	•	
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City & State Ft. Lauderdale, FL.    Ft. Lauderdale, FL.   Ft. Lauderdale, FL.   St. FEI Number   01-0824200   Not Applicable	Suite, Apt. #, etč:-			Apt. #, etc.		4. Date Incorporated or Qualified				
To Name and Address of Current Registered Agent    Rafael Lebron	Ft. Lauc		1 '	,			5. FEI Number Applied For			
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  4704 NE 11th Ave.  Suite, Apt. #, Etc.  City FL Lauderdale  State   Zip Code FL   333334   8. 1. being appointed the registered agent of the above named corporation, an familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent   State   Zip Code Registered Agent   Zi			I '	1		CEQUIEICATE OF STATUS DESIDED 7 30.75 Additional Fee required				
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	this re owed on this	ees								

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