

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000083909

Entity Name: TOP-LINE SECURITY, INC.

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

5540 NW 101ST CT.  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

5540 NW 101ST CT.  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 41-2053742

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CAICEDO, ALVARO  
5540 NW 101ST CT.  
DORAL, FL 33178 US

**Name and Address of New Registered Agent:**

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: ALVARO CAICEDO

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: CAICEDO, ALVARO  
Address: 5540 NW 101ST CT.  
City-St-Zip: DORAL, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR. (X) Change ( ) Addition  
Name: CAICEDO, ALVARO  
Address: 5540 NW 101ST CT.  
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OWNER/ ALVARO CAICEDO

Electronic Signature of Signing Officer or Director

MR.

04/30/2008

Date