

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000093449

**FILED**  
**Jan 20, 2009**  
**Secretary of State**

**Entity Name:** TOP NOTCH DEVELOPERS CO.

**Current Principal Place of Business:**

10441 NW 28 ST #103  
MIAMI, FL 33172

**New Principal Place of Business:**

4791 SW 5 STREET  
MIAMI, FL 33134

**Current Mailing Address:**

10441 NW 28 ST #103  
MIAMI, FL 33172

**New Mailing Address:**

11700 SW 110 LANE  
MIAMI, FL 33186

**FEI Number:** 91-0905385

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SARUT, JOSE J  
10441 NW 28 ST  
STE 400  
MIAMI, FL 33172 US

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

ESCOBAR, NATALIA  
11700 SW 110 LANE  
MIAMI, FL 33186 US

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: NATALIA ESCOBAR

01/20/2009

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: P ( ) Delete  
Name: SARUT, JOSE J  
Address: 10441 NW 28 ST, STE 103  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: SARMIENTO, MANUEL  
Address: 10871 NW 33 STREET  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete  
Name: ESCOBAR, NATALIA  
Address: 10441 NW 28 STREET, STE 103  
City-St-Zip: MIAMI, FL 33172

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

Title: P (X) Change ( ) Addition  
Name: ESCOBAR, NATALIA  
Address: 11700 SW 110 LANE  
City-St-Zip: MIAMI, FL 33186

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: JOSE, SARUT  
Address: 4791 SW 5 STREET  
City-St-Zip: MIAMI, FL 33134

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: NATALIA ESCOBAR

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date