2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000049574

Entity Name: TOP NOTCH PRESEVATION INC.

FILED Apr 25, 2005 Secretary of State

3740 SW 32 CT 4270 SW 40 STREET HOLLYWOOD, FL 33023 HOLLYWOOD, FL 33023

Current Mailing Address: New Mailing Address:

3740 SW 32 CT 4270 SW 40 STREET HOLLYWOOD, FL 33023 HOLLYWOOD, FL 33023

FEI Number: 20-0007906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SANTIAGO, JOSEPH A
3740 SW 32 CT
HOLLYWOOD, FL 33023 US
SANTIAGO, JOSEPH
4270 SW 40 STREET
HOLLYWOOD, FL 33023 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: JOSEPH SANTIAGO 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: SANTIAGO, JOESPH A Name: SANTIAGO, JOESPH A Address: 3740 SW 32 CT Address: 4270 SW 32 CT

City-St-Zip: HOLLYWOOD, FL 33023 US City-St-Zip: HOLLYWOOD, FL 33023 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 SANTIAGO, MARCELA
 Name:
 SANTIAGO, MARCELA

 Address:
 3740 SW 32 CT.
 Address:
 4270 SW 40 STREET

 City-St-Zip:
 HOLLYWOOD, FL 33023
 City-St-Zip:
 HOLLYWOOD, FL 33023

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 SANTIAGO, JOSEPH

 Address:
 Address:
 4270 SW 40 STREET

 City-St-Zip:
 City-St-Zip:
 HOLLYWOOD, FL 33023

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARCELA SANTIAGO T 04/25/2005