2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074751

Entity Name: OPTIMUM TOP ART CORPORATION

FILED Sep 21, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
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16091 BLATT BLVD. 197 LAKEVIEW DR. #116 BUILDING 21 # 205 WESTON, FL 33326 WESTON, FL 33326

Current Mailing Address: New Mailing Address:

 16091 BLATT BLVD.
 197 LAKEVIEW DR.

 # 116
 BUILDING 21 # 205

 WESTON, FL 33326
 WESTON, FL 33326

FEI Number: 20-0076865 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:

PEREZ, JOHN
16091 BLATT BLVD.
116
WESTON, FL 33326 US
PEREZ, JOHN
197 LAKEVIEW DR.
BUILDING 21 # 205
WESTON, FL 33326 US
WESTON, FL 33326 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: /JOHN PEREZ/ 09/21/2004

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: PEREZ, JOHN Name:

 Address:
 16091 BLATT BLVD. # 116
 Address:

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition
Name: GOMEZ_INES_MARIA Name:

 Name:
 GOMEZ, INES MARIA
 Name:

 Address:
 16091 BLATT BLVD # 116
 Address:

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:

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: /JOHN PEREZ/ P 09/21/2004