2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 30, 2006 8:00 am Secretary of State **DOCUMENT # P04000043217** 01-30-2006 90056 044 ***150.00 TOP NOTCH, INCORPORATED Principal Place of Business Mailing Address 10542 SW 22ND TERRACE 10542 SW 22ND TERRACE MIAMI, FL 33165 MIAMI, FL 33165 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 01242006 Chg-P CR2E034 (11/05) City & State 4. FEI Number Applied For City & State 73-1700536 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IBANEZ-ANIBAL----Street Address (P.O. Box Number is Not Acceptable) 10542 SW 22ND TERRACE MIAMI, FL 33165 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Delete ☐ Change Addition TITLE Martin-Ibanez, Yanet 10542 S.W. 22. Terrace IBANEZ ANIBAL NAME NAME 10542, SW 22ND TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP Miami, Fl 33165 CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change Addition Delete TITLE TIELE NAME STREETHADORESS STREET ADDRESS 6T-21P CITY-ST-ZIP does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if er like empowered: 12. I hereby certify that the information indicated on this report or supplies of the corporation or the reco SIGNATURE:

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