

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000054302

FILED
Nov 02, 2006
Secretary of State

Entity Name: TOP SPOT PUBLICATIONS INCORPORATED

Current Principal Place of Business:

6000 S RIO GRANDE AVE
#104
ORLANDO, FL 32809 US

Current Mailing Address:

6000 S RIO GRANDE AVE
#104
ORLANDO, FL 32809 US

New Principal Place of Business:

6807 VISITOR'S CIRCLE
SUITE F
ORLANDO, FL 32819 US

New Mailing Address:

6807 VISITOR'S CIRCLE
SUITE F
ORLANDO, FL 32819 US

FEI Number: 55-0893516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORES, LOUIE D
6000 S RIO GRANDE AVE
#104
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

FLORES, LOUIE D
6807 VISITOR'S CIRCLE
SUITE F
ORLANDO, FL 32819 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: LOUIE D. FLORES

11/02/2006

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: FLORES, LOUIE D
Address: 6000 S RIO GRANDE AVE #104
City-St-Zip: ORLANDO, FL 32809 US

Title: SEC () Delete
Name: RAMOS, HELEN
Address: 6000 S RIO GRANDE AVE #104
City-St-Zip: ORLANDO, FL 32809

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLORES, LOUIE D
Address: 6807 VISITOR'S CIRCLE SUITE F
City-St-Zip: ORLANDO, FL 32819 US

Title: SEC (X) Change () Addition
Name: RAMOS, HELEN
Address: 6807 VISITOR'S CIRCLE SUITE F
City-St-Zip: ORLANDO, FL 32819

Title: DIR () Change (X) Addition
Name: RIVERA, JASON MR.
Address: 6807 VISITOR'S CIRCLE SUITE F
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUIE D. FLORES

PRES

11/02/2006

Electronic Signature of Signing Officer or Director

Date