P05000063226

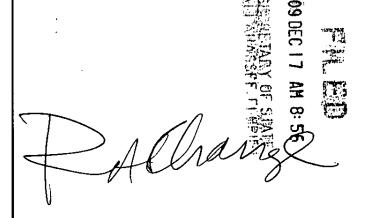
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies · Certificates of Status			
Certified Copies			
Special Instructions to Filing Officer:			
·			

Office Use Only



300163361223

12/17/09--01009--011 **35.00



D. CONNELL DEC 2 1 2009

COVER LETTER

Amendment Section Division of Corporations TO:

SUBJECT:	UBJECT: TOP 10 ELECTRONICS CORPORATION Name of Corporation		
	Name of C	Corporation	
DOCUMENT NUM	MBER:PO5	5000063226	
The enclosed Staten	nent of Change of Registered Offic	re/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:			
MIKE SAN MIGUEL, E.A. Name of Contact Person			
	· Name of Co	mact reison	
M. SAN MIGUEL, INC			
Firm/Company			
4442 SEA GRAPE DRIVE			
Address			
LAUDERDALE BY THE SEA, FL 33308			
City/State and Zip Code			
MIKEEA@COMCAST NET			
MIKEEA@COMCAST.NET. E-mail address: (to be used for future annual report notification)			
		γ	
For further informat	tion concerning this matter, please	call:	
MIKE	SAN MIGUEL, E.A.	at (954) 647 - 7752	
	ne of Contact Person	at (954) 647 - 7752 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00	0 check made payable to the Depar	rtment of State.	
	Mailing Address: Amendment Section	Street Address:	
		Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of the corporation: TOP 10 ELECTRONICS CORPORATION			
2. The principal office address: 2080 S. OCEAN DRIVE Suite 605			
HALLANDALE, FL. 33009			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 4/29/05 Document number: PO5000063	3226		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)			
JOHNNY ANIDJAR (RESIGNED)			
SA 2			
	•		
	Continued.		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
CHRISTINA SANCHEZ BALDA	tallar de car.		
2080 S. OCEAN DRIVE, Suite 605	1		
P.O. Box NOT acceptable	•		
HALLANDALE, FL. 33009			
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	agent,		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.			
Cheistra Sanctes CHRISTINA SANCHEZ BALDA Signature of an office or director Printed or typed name and title	<u> </u>		
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete perform y duties, and I am familiar with and accept the obligation of my position as registered agent. Of document is being filed merely to reflect a change in the registered office address, I hereby confirm to corporation has been notified in writing of this change.	rmance r, if this hat the		
NOVEMBER 27, 2009 Signature of Registered Agent Date			
Signature of Registered Agent Date			
If signing on behalf of an entity:			
Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *