

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130041

FILED  
Feb 01, 2006  
Secretary of State

Entity Name: TOP GROUP PRODUCTIONS CORP.

## Current Principal Place of Business:

6380 NW 114TH AVE.  
305  
MIAMI, FL 33178 US

## New Principal Place of Business:

10720 NW, 82 TERRACE  
2  
DORAL, FL 33178 US

## Current Mailing Address:

6380 NW 114TH AVE.  
305  
MIAMI, FL 33178 US

## New Mailing Address:

10720 NW, 82 TERRACE  
2  
DORAL, FL 33178 US

FEI Number: 20-3503072

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VELEZ, YINA  
6380 NW 114TH AVE  
305  
MIAMI, FL 33178 US

## Name and Address of New Registered Agent:

VELEZ, YINA  
10720 NW, 82 TERRACE  
2  
DORAL, FL 33178 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:

02/01/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VELEZ, YINA  
Address: 6380 NW 114TH AVE. APT. 305  
City-St-Zip: MIAMI, FL 33178 US

Title: VP ( ) Delete  
Name: PARRA, MARIANA  
Address: 6380 NW 114TH AVE APT. 305  
City-St-Zip: MIAMI, FL 33178 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VELEZ, YINA  
Address: 10720 NW, 82 TERRACE APT # 2  
City-St-Zip: DORAL, FL 33178 US

Title: VP (X) Change ( ) Addition  
Name: PARRA, MARIANA  
Address: 10720 NW, 82 TERRACE APT # 2  
City-St-Zip: DORAL, FL 33178 US

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: YINA VELEZ

PSDT

02/01/2006

Electronic Signature of Signing Officer or Director

Date