## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000005492

Entity Name: TOPDOG OF MIAMI, INC.

FILED Oct 10, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

4000 NE 169 STREET

SUITE 507

NORTH MIAMI BEACH, FL 33160 US

Current Mailing Address: New Mailing Address:

4000 NE 169 STREET P.O. BOX 61-2737

SUITE 507 NORTH MIAMI BEACH, FL 33261 US

NORTH MIAMI BEACH, FL 33160 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLAGHASSI, SUBHI E 4000 NE 169 STREET SUITE 507

NORTH MIAMI BEACH, FL 33160 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: SUBHI GLAGHASSI

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: PST (X) Change ( ) Addition

 Name:
 GLAGHASSI, SUBHI E
 Name:
 GLAGHASSI, SUBHI E

 Address:
 4000 NE 169 STREET
 Address:
 P.O. BOX 61-2737

City-St-Zip: SUITE 507, FL 33160 US City-St-Zip: NORTH MIAMI BEACH, FL 33261 US

Title: S () Delete Title: VPTS (X) Change () Addition

 Name:
 GLAGHASSI, JOSEPHINE
 Name:
 GLAGHASSI, RIEM

 Address:
 4000 NE 169 STREET
 Address:
 P.O. BOX 61-2737

City-St-Zip: SUITE 507, FL 33160 US City-St-Zip: NORTH MIAMI BEACH, FL 33261 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GLAGHASSI, RIEM
 Name:

 Address:
 4000 NE 169 STREET
 Address:

 City-St-Zip:
 SUITE 507, FL 33160 US
 City-St-Zip:

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GLAGHASSI, ABBOUD
 Name:

 Address:
 4000 NE 169 STREET
 Address:

 City-St-Zip:
 SUITE 507, FL 33160 US
 City-St-Zip:

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GLAGHASSI, ELIAS
 Name:

 Address:
 4000 NE 169 STREET
 Address:

 City-St-Zip:
 SUITE 507, FL 33160 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SUBHI GLAGHASSI P. 10/10/2008