2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# P08000057954

Entity Name: TOP 12 MODELING AND MANAGEMENT, INC

Current Principal Place of Business:

306 E BULLARD AVE
SUITE B
TEMPLE TERRACE, FL 33417 US

New Principal Place of Business:

1404 ASTOR COMMONS PL.
203
BRANDON, FL 33511 US

Current Mailing Address:

PO BOX 451203
MIAMI, FL 33245 US

New Mailing Address:

PO BOX 47142
TAMPA, FL 33464 US

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

Name and Address of Current Registered Agent:

MARTINEZ, ANGELA
2100 SALZEDO ST
STE 201-B
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

WILLIAMS, M.
1404 ASTOR COMMONS PL.
203
BRANDON, FL 33511 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: M. WILLIAMS 05/01/2009
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: LEVATTE, RONELL
Address: PO BOX 451203
City-St-Zip: MIAMI, FL 33245 US

Title: VP (X) Delete
Name: EDWARDS, TRINA
Address: PO BOX 451203
City-St-Zip: MIAMI, FL 33245

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEVATTE, RONELL
Address: PO BOX 47142
City-St-Zip: TAMPA, FL 33646 US

Title: ( ) Change ( ) Addition
Name:
Address:
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: RONELL LEVATTE P 05/01/2009
Electronic Signature of Signing Officer or Director Date