

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 07, 1999 8:00 am
Secretary of State

09-07-1999 90005 035 ***150.00

DOCUMENT # **P94000066217**

Corporation Name

TOP PROMOTIONS, INC.

Principal Place of Business

**340 MINORCA AVE
STE 3
CORAL GABLES FL 33134-4308**

Mailing Address

**340 MINORCA AVE
STE 3
CORAL GABLES FL 33134-4308
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/31/1994

4. FEI Number

65-0527984

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

27

City & State

City & State

28

Zip

Country

25

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FERNANDEZ-CARRION, ALICIA
340 MINORCA AVE
STE 3
CORAL GABLES FL 33134**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

P ☐ DELETE
FERNANDEZ-CARRION, ALICIA
ST ADDRESS **340 MINORCA AVE STE 3**
ST-ZIP **CORAL GABLES FL 33134**

V ☐ DELETE
SIRVENT, MERITXELL
ST ADDRESS **340 MINORCA AVE STE 3**
ST-ZIP **CORAL GABLES FL 33134**

☐ DELETE
ST ADDRESS
ST-ZIP

☐ DELETE
ST ADDRESS
ST-ZIP

☐ DELETE
ST ADDRESS
ST-ZIP

☐ DELETE
ST ADDRESS
ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ALICIA FERNANDEZ-CARRION
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

August 30, 1999

CR2E034 (5/99)



P94000066217
612737-90005-35

August 27 1999

TO: FLORIDA DEPARTMENT OF STATE
FROM: TOP PROMOTIONS INC

To Whom It May Concern:

Just to let you know that we never received the first letter requiring the payment, so we spoke with Mrs. Cathy in Tallahassee and very kindly she explain to us that we just disagreed the second letter for the amount of \$550.00 DLL and send the regular payment of \$150.00 DLL

Sincerely,

A handwritten signature in black ink, appearing to read "A. Carrión", is written over a horizontal line.

Alicia Fernández-Carrión
President

*Enclosed you will find the check.

340 MINORCA AVE. SUITE 3. CORAL GABLES, FL 33134.
PHONE: (305) 444 4410 FAX: (305) 444 4439