

2004 FOR PROFIT CORPORATION REINSTATEMENT

182


FILED

04 NOV -3 PM 12: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000072877

1. Entity Name
TOPP COMM, INC.



Principal Place of Business: 8390 N.W. 25TH STREET MIAMI, FL 33122

Mailing Address: 8390 N.W. 25TH STREET MIAMI, FL 33122

2. Principal Place of Business: 8390 N.W. 25th St. Suite, Apt. #, etc.

3. Mailing Address: 8390 N.W. 25th St. Suite, Apt. #, etc.

City & State: Miami, FL 33122

City & State: Miami, FL 33122

Zip: 33122 Country: U.S.A.

Zip: 33122 Country: U.S.A.



10142004 REIN-P CR2E098 (6/04) **MRS**

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION, FL 33324

4. FEI Number: 65-0858983

Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name: Corporate Creations Network, Inc.
Street Address (P.O. Box Number is Not Acceptable): 11380 Prosperity Farms Road #221E
City: Palm Beach Gardens FL Zip Code: 33410

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Karla Sarria*
Signature, typed or printed name of registered agent and title if applicable. **Karla Sarria**
VP Corporate Creations

DATE: 11/2/04

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: DP NAME: POLLAK, F J STREET ADDRESS: 8390 N.W. 25TH STREET CITY-ST-ZIP: MIAMI, FL 33122	<input type="checkbox"/> Delete	TITLE: DP NAME: POLLAK, F J STREET ADDRESS: 8390 NW 25 Street CITY-ST-ZIP: Miami, Florida 33122	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: BLANCO, GUSTAVO STREET ADDRESS: 8390 NW 25 STREET CITY-ST-ZIP: MIAMI, FL 33122	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: 400042802324 CITY-ST-ZIP: 11/17/04--01005--005 **158.75	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: REINSTATEMENT 04 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 10/14/04
Daytime Phone #: 805-640-2004

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Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Topp Comm, Inc.


Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. 158.75 check payable to Florida Department of State

We never received the Uniform Business Report for the following year(s) that should have been mailed to us:

2004

Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: 
by K. Samra as attorney-in-fact

Name: F.J. Pollak

Title: President

Date: 11/2/04