2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S78703

FILED Mar 08, 2007 Secretary of State

Entity Name: TIP TOP CONSTRUCTION INC.

Current Principal Place of Business:		New Principal Place of Business:		
06 1ST S IAVANA,	ST NE FL 32333			
urrent N	Mailing Addr	ess:	New Mailing Addre	255:
O BOX 1 IAVANA,	1167 FL 32333			
El Numbei	r: 59-3091308	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	TIMBERS RE	J		
he above		US y submits this statement for the	purpose of changing its register	red office or registered agent, or both
he above	e named entit te of Florida. IRE:	y submits this statement for the		red office or registered agent, or both
he above the Stat	e named entit te of Florida. IRE: Electro	y submits this statement for the onic Signature of Registered Ag		red office or registered agent, or both
he above the Stat	e named entit te of Florida. IRE: Electro	y submits this statement for the		
he above the Stat IGNATU	e named entit te of Florida. IRE: Electro	y submits this statement for the point of the point Signature of Registered Aging Trust Fund Contribution ().	ent	red office or registered agent, or both, Date GES TO OFFICERS AND DIRECTO
he above the Stat IGNATU	e named entitite of Florida. IRE: Electro Impaign Financi	y submits this statement for the poinc Signature of Registered Aging Trust Fund Contribution (). CTORS: () Delete SEFREY, MBERS RD	ent	Date
he above the Stat IGNATU ection Ca FFICER ttle: ame: ddress:	e named entity te of Florida. IRE: Electro Impaign Financi IS AND DIRE P DIEKMAN, JE 338 TALL TIN HAVANA, FL	y submits this statement for the poinc Signature of Registered Aging Trust Fund Contribution (). CTORS: () Delete EFFREY, MBERS RD 32333 () Delete USAN MBERS RD	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO

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: SUSAN S. DIEKMAN VP 03/08/2007