

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V09912

Entity Name: TOPSVILLE, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

11800 NW 102 RD
SUITE 2
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

11800 NW 102 RD
SUITE 2
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 95-3006205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHERTZERT, KABAT
9400 S DADELAND BLVD
STE 603
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: AMIEL, MAURICE
Address: 11800 NW 102 ROAD
City-St-Zip: MIAMI, FL 33178

Title: P () Delete
Name: CHESTNOV, ROBERT
Address: 5801 JEFFERSON ST.
City-St-Zip: WEST NEW YORK, NJ 07093

Title: VP () Delete
Name: CHRISTON, TONY
Address: 5801 JEFFERSON ST.
City-St-Zip: WEST NEW YORK, NJ 07093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: CHESTNOV, ROBERT
Address: 197 WEST SPRING VALLEY ROAD
City-St-Zip: MAYWOOD, NJ 07607

Title: VP (X) Change () Addition
Name: CHRISTON, TONY
Address: 197 WEST SPRING VALLEY ROAD
City-St-Zip: MAYWOOD, NJ 07607

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: MAURICE AMIEL

CFO

04/08/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date