## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H08717

(1)

BOB'S TOP SHOP, INC.

## FILED May 01 1998 8:00am Secretary of State

Principal Place of Business Mait	ing Address		-	MI BIBII BIBII BIBII BIBII 1071
2610 E. 37TH STREET 2610 E. 37TH STREET PANAMA CITY FL 32405 PANAMA CITY FL 32405				
			DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualified	
			06/18/1984	
2. Principal Place of Business 2a. M 21 26 26	Mailing Address	5th 5t.	4. FEI Number	Applied For
	Suite, Apt. #, etc.		59-2427934	Not Applicable \$8.75 Additional
22 27	•		5. Certificate of Status Desired	Fee Required
<b></b> '	by & State	E1	6. Election Campaign Financing	\$5.00 May Be
Zip         Country         Z		TU FL	Trust Fund Contribution	Added to Fees
24 25 29 3	32401 30	USA	8. This corporation owes or has paid the cure Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registe			10. Name and Address of New Registered	Agent
GAINER, GERALD DWAINE 81 Name				
2135 EAST 5TH ST. PANAMA CITY FL		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
		83		
		84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607	.1508, Florida Statutes, th	e above-named corpo	oration submits this statement for the purpose of	changing its registered
office or registered agent, or both, in the State of Florida agent. I am familiar with, and accept the obligations of S	Such change was autho Section 607.05 <mark>05, Florid</mark> a	rized by the corporali Statules.	on's board of directors. I hereby accept the ap-	pointment as registered
SIGNATURE				
Signature system or preside a presided against the gratered against and title dia  12. OFFICE HS AND DIRECT		siered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE P		1.1 TITLE	ADDITIONS/OFFANGES TO OFFICERS AN	Change Addition
NAME GAINER, GERALD DWAINE	2	1.2 NAME		
STREET ADDRESS 3010 EAST 3RD ST.	1	3.3 STREET ADDRESS		
CITY-ST-ZIP PANAMA CITY FL		1.4 CITY - ST - ZIP		<u> </u>
TITLE ST	☐ DELETE ☐ 2	21 TITLE		☐ Change ☐ Addition
NAME GAINER, GWEN	i i	2.5 NAME		}
STREET ADDRESS 3010 EAST 3RD ST.  CITY-ST-ZIP PANAMA CITY FL		2.3 STREET ADDRESS		
CITY-ST-ZIP PANAMA CITY FL		2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		3.2 NAME		CT CONTRACTOR
STREET ADDRESS		3.3 STREET ADDRESS		ļ
CITY-ST-ZIP	1	3.4. CITY-ST-ZIP		
TITLE	☐ DELETE 4	ET TITLE		Change Addition
NAME		1. 2 NAME		[
STREET ADDRESS		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		4.4 CITY-ST-ZIP		Change Addition
NAME	and the second s	5.1 TITLE 5.2 NAME		□ cuange □ voucou
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST- ZIP		
TITLE	200	S 1 TITLE		Change Addition
NAME	$\epsilon$	2 NAME		
STREET ADDRESS	€	3 STREET ADDRESS		
CITY-ST-ZIP		4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further co	

14. 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 chapted, or on an attachment with an address.

SIGNATURE:

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College Consider

4-21-48

450-963-1683