

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000115863

FILED
Apr 25, 2003
Secretary of State

Entity Name: TOP DISTRIBUTION COMPANY

Current Principal Place of Business:

13652 N. 12TH STREET
TAMPA, FL 336134241

New Principal Place of Business:

736 S. 50TH ST.
G21
TAMPA, FL 33619

Current Mailing Address:

PO BOX 89936
TAMPA, FL 336890415

New Mailing Address:

FEI Number: 30-0148757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EATMAN, MICHAEL T ESQ.
205 N. PARSON AVENUE SUITE A
BRANDON, FL 335104515 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Change (X) Addition
Name: CASANOVA, FRANCISCO J
Address: 1405 COMMERCE WAY, SUITE 700
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: VTD () Change (X) Addition
Name: MONTIEL, RIGO A
Address: 3374 NW 53RD CIRCLE
City-St-Zip: BOCA RATON, FL 33496 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANCISCO J CASANOVA

PSD

04/25/2003

Electronic Signature of Signing Officer or Director

_____ Date