

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 AM 7:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000033193 (1)**

A TOP JOB, INC.

Principal Place of Business: 5176 U.S. 1, KEY WEST FL 33040
Mailing Address: 5176 U.S. 1, KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/29/1994
3a. Date of Last Report

2. Principal Place of Business		2b. Mailing Address		4. FET Number		Applied For	
21. State Apt. # etc.		26. State Apt. #, etc.		'95-0504012		Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Deemed		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation has filed for articles of incorporation in Florida Statutes		Yes <input type="checkbox"/> No <input type="checkbox"/>	

9. Name and Address of Current Registered Agent

SAUNDERS, BELINDA R
3212 HARRIET AVE.
KEY WEST FL 33040

10. Name and Address of New Registered Agent

B1. Name	
B2. Street Address (P.O. Box Number is Not Acceptable)	
B3. City	
B4. State	FL
B5. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of registered agent or registered agent's authorized representative)

(Signature of Agent appointed to prepare this statement)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. NAME	PSTD LANG, ERIC B	11. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. STREET ADDRESS	#1 EMERALD DR.	12. STREET ADDRESS	
13. CITY & STATE	KEY WEST FL 33040	13. CITY & STATE	
14. NAME		14. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY & STATE		16. CITY & STATE	
17. NAME		17. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. STREET ADDRESS		18. STREET ADDRESS	
19. CITY & STATE		19. CITY & STATE	
20. NAME		20. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21. STREET ADDRESS		21. STREET ADDRESS	
22. CITY & STATE		22. CITY & STATE	
23. NAME		23. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
24. STREET ADDRESS		24. STREET ADDRESS	
25. CITY & STATE		25. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law for 1191.05(4), Florida Statutes. I further certify that the information indicated on this annual report or supplementary information report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of this corporation or the receiver or liquidator empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 on this filing if changed or on an amendment with my address.

SIGNATURE:

Eric B. Lang
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

4/21/95 (30) 274-1274