


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 28, 2006 08:00 AM
Secretary of State

DOCUMENT # 379306 1. Entity Name TOP-LINE HARDWARE, INC. OF FLORIDA	
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Principal Place of Business 23 SE 22ND AVENUE POMPANO BEACH, FL 33062	Mailing Address 23 SE 22ND AVENUE POMPANO BEACH, FL 33062
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DO NOT WRITE IN THIS SPACE

07122006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1321276	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, SIDNEY E
2501 NE 14TH ST.
UNIT 301
MARATHON SHORES, FL 33052

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

U000000572624
07/28/06-80008-004 150.00

DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PISTARELLI, JUDITH 23 SW 2ND AVE. POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PISTARELLI, RAYMOND 23 S.E. 22ND AVE. POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PISTARELLI, RAYMOND JR. 23 SE 22ND AVE. POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Raymond Pistarelli 7/23/06

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #