

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

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # 464233 (6)
 1. Corporation Name
 TOP'S VACUUM CLEANERS, INC.

Principal Place of Business Mailing Address
 3001 14TH ST. W. 3001 14TH ST. W.
 BRADENTON FLORIDA 34205 BRADENTON FLORIDA 34205

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
 23 City & State 28 City & State
 24 Zip 25 Country 29 Zip 30 Country

APPROVED AND FILED
 95 MAY - 1 PM 3:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.
 3. Date Incorporated or Qualified 3a. Date of Last Report
 10/04/1974 05/01/1994
 4. FEI Number Applied For
 59-1553854 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 7. This corporation has liability for intangible tax under § 199.032, Florida Statutes Yes No

8. Name and Address of Current Registered Agent
 BLALOCK, ROBERT
 3001 14TH ST. W.
 BRADENTON FLORIDA 34205

10. Name and Address of New Registered Agent
 B1 Name
 B2 Street Address (P.O. Box Number is Not Acceptable)
 B3
 B4 City 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 _____ DATE _____
Signature (Print or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOPJUN, HAROLD	1.2 NAME	
STREET ADDRESS	3001 14TH STREET, WEST	1.3 STREET ADDRESS	
CITY, ST, ZIP	BRADENTON FL	1.4 CITY, ST, ZIP	34205
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOPJUN, TERRY	2.2 NAME	
STREET ADDRESS	3001 14TH STREET, WEST	2.3 STREET ADDRESS	
CITY, ST, ZIP	BRADENTON FL	2.4 CITY, ST, ZIP	34205
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOPJUN, RANDALL	3.2 NAME	
STREET ADDRESS	3001 14TH STREET, WEST	3.3 STREET ADDRESS	
CITY, ST, ZIP	BRADENTON FL	3.4 CITY, ST, ZIP	34205
TITLE	STD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOPJUN, GENEVIEVE R.	4.2 NAME	
STREET ADDRESS	3001 14TH STREET, WEST	4.3 STREET ADDRESS	
CITY, ST, ZIP	BRADENTON FL	4.4 CITY, ST, ZIP	34205
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 887, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 4-28-95 EMPLOYEE NUMBER: 813 748 5997
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR