

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 532552

FILED  
Feb 25, 2011  
Secretary of State

**Entity Name:** TOP VALUE AUTO SALES, INC.

**Current Principal Place of Business:**

4701 E. HILLSBOROUGH AVE.  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

4701 E. HILLSBOROUGH AVE.  
TAMPA, FL 33610

**New Mailing Address:**

6924 SPENCER CIRCLE  
TAMPA, FL 33610

**FEI Number:** 59-1734595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERT E. BARBER, SR.  
6924 SPENCER CIRCLE  
TAMPA, FL 33610 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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BARBER, ROBERT E.  
**Address:** 6924 SPENCER CIRCLE  
**City-St-Zip:** TAMPA FL,

**Title:** ST  
**Name:** CRIBBS, SANDRA S  
**Address:** 512 E MORRELL DR  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** D  
**Name:** BARBER, ROBERT E JR  
**Address:** 4603 CORTEZ STREET  
**City-St-Zip:** TAMPA, FL 33629

I hereby 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 all other like empowered.

**SIGNATURE:** ROBERT E.BARBER, SR.

PRES

02/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date