

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # M71129

(4)

1. Corporation Name
TOPP, INC.

Principal Place of Business
C/O 8280 NW 27TH STREET
SUITE 506
MIAMI FL 33122

Mailing Address
C/O 8280 NW 27TH STREET
SUITE 506
MIAMI FL 33122



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/23/1988	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 65-0037519	Applied For Not Applicable
23 Zip	24 Country	28 Zip	29 Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

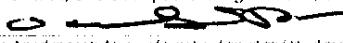
TOPP, DAVID
8280 NW 27TH STREET, SUITE 506
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name ODALYS KUCK
82 Street Address (P.O. Box Number is Not Acceptable)
8280 N.W. 27 ST., SUITE 506
83
84 City MIAMI FL 85 Zip Code 33122

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, typed or printed name of registered agent and the, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE


Odalys Kuck

3/2/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TO TOPP, DORA 8280 NW 27TH ST., STE. 506 MIAMI FL 33122	11 TITLE	
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	
TITLE	CEO TOPP, DAVID 8280 NW 27TH ST., STE. 506 MIAMI FL 33122	21 TITLE	
NAME		22 NAME	2/15
STREET ADDRESS		23 STREET ADDRESS	9405
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	D TOPP, RISIA WINE 8280 NW 27TH ST., STE. 506 MIAMI FL	31 TITLE	
NAME		32 NAME	APPROVED BY:
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	D TOPP, MARK 8280 NW 27TH ST., STE. 506 MIAMI FL 33122	41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	P SAINT-MALO, AGUILINO 8280 NW 27TH ST., STE. 506 MIAMI FL 33122	51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	S KUCK, ODALYS 8280 NW 27TH ST., STE. 506 MIAMI FL 33122	61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



Odalys Kuck

3/2/98

305-477-1414

CR2E034 (10/97)