2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 15, 2004 08:00 AM-**DOCUMENT # P01000040534 Secretary of State** TOPER ENTERPRISES, INC. Principal Place of Business Mailing Address 243 ASHLEY LAKE DRIVE 243 ASHLEY LAKE DRIVE MELROSE, FL 32666 MELROSE, FL 32666 03102004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3720724 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent W. PERRY ROLLINS DO NOT WRITE 243 ASHLEY LAKE DRIVE MELROSE, FL 32666 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be U00000088467 03/15/04-80052-022 150.00 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE W. PERRY ROLLINS MARKE STREET ADDRESS 243 ASHLEY LAKE DRIVE CITY-ST-ZIP MELROSE, FL 32666 TITLE NAME STREET ADDRESS CITY-ST-ZIP THE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP THE IN THIS SPACE NAME STREET ADDRESS CHY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

W. PERRY ROLL TWS

SIGNATURE:

STREET ADDRESS CITY - ST - TIP

GNATURE AND TYPED OR PROPED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-04

352-475-1946

FILED