

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000109903

Entity Name: AA TOP SHOP, INC.

**FILED**  
**Nov 20, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

4034 N DAVIS HWY  
PENSACOLA, FL 32503 UN

**New Principal Place of Business:**

**Current Mailing Address:**

4034 N DAVIS HWY  
PENSACOLA, FL 32503

**New Mailing Address:**

FEI Number: 20-1423780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLACK, LISA  
4034 N. DAVIS HWY  
PENSACOLA, FL 32503 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: LISA BLACK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BRAXTON, NEAL  
Address: 4034 N DAVIS HWY  
City-St-Zip: PENSACOLA, FL 32503

Title: VP  
Name: BLACK, LISA  
Address: 4034 NORTH DAVIS HWY.  
City-St-Zip: PENSACOLA, FL 32503

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: LISA BLACK

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

VP

11/20/2014

\_\_\_\_\_  
Date