

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
 Sandra B. Morrison
 Secretary of State

DEPARTMENT OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 25 PM 12: 15

DOCUMENT # P93000055384 (0)

1. Corporation Name
TOP HAT TRANSFER INC

Principal Place of Business
 13914 OLD DIXIE HWY
 HUDSON FL 34667

Mailing Address
 13914 OLD DIXIE HWY
 HUDSON FL 34667

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/04/1993
 3a. Date of Last Report: 04/20/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number: 59-3193511

Applied For: Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCOTT, MARJORIE
 12615 SOCIAL DRIVE
 HUDSON FL 34667

81 Name

82 Street Address (P O Box Number is Not Acceptable)

83

84 City

FL

85

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 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 of present holder of registered agent and the corporation)

(NOTE: Registered Agent signature required when mandatory)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE: D
 NAME: SCOTT, LAWRENCE P
 STREET ADDRESS: 12615 SOCIAL DRIVE
 CITY, ST, ZIP: HUDSON FL 34667

11 TITLE: Change Addition

TITLE: D
 NAME: SCOTT, MARJORIE
 STREET ADDRESS: 12615 SOCIAL DRIVE
 CITY, ST, ZIP: HUDSON FL 34667

12 NAME: Change Addition

TITLE: Change Addition

13 STREET ADDRESS: Change Addition

TITLE: Change Addition

14 CITY, ST, ZIP: Change Addition

TITLE: Change Addition

15 NAME: Change Addition

TITLE: Change Addition

16 STREET ADDRESS: Change Addition

TITLE: Change Addition

17 CITY, ST, ZIP: Change Addition

TITLE: Change Addition

18 NAME: Change Addition

19 STREET ADDRESS: Change Addition

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29 CITY, ST, ZIP: Change Addition

30 NAME: Change Addition

31 STREET ADDRESS: Change Addition

32 CITY, ST, ZIP: Change Addition

33 NAME: Change Addition

34 STREET ADDRESS: Change Addition

35 CITY, ST, ZIP: Change Addition

SIGNATURE:

Lawrence P. Scott
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 LAWRENCE P. SCOTT

5/23/95

913-963-2103