**FILED** 

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90048 046 \*\*\*150.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000023943

1. Corporation Name

TOP ASS	Surance internat	TIONAL, INC.									
Principal Place	e of Business	Mailing	Address						IATU BAU BAU ABU	i iline ama rem e	1000 (111 100)
3969 NE 163RD STREET 3969 NE 163RD STREET											
NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33				33160	1160			20 110	· MOITE IN THE	CORACE	
							<u> </u>	DO NO I	WRITE IN THIS	SSPACE	
							1	03/29/1994			
2. Principal Pt	lace of Business	2a. Mai	ling Address				4.	FEI Number	<del></del>		plied For
21		26						APPLIED FOR 6!	<u>&gt;-0480</u>		t Applicable
Suite, Apt.	#, etc.	Suit	e, Apt. #, etc.				5.	Certifcate of Status Desi	red 🗆	\$8.75 A Fee Red	
City & State	e	City	& State				6.	Election Campaign Final	ncing	\$5.00	May Be
23		28						Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip		Cour	ntry		8.	This corporation owes the	e current year Ir		
24	25	29		30				Personal Property Tax.			□No
	9. Name and Address of	of Current Registered	d Agent		81	Name	10.	Name and Address of	New Registered	Agent	
	ITIS, DEMETRE O NE 163RD STREET				82	Street Ad	dress (P	.O. Box Number is Not A	cceptable)		
	ITH MIAMI BEACH FL 33	3160			83	· · · · · · · · · · · · · · · · · · ·	·····				
					84	City				85 Zip C	ode
							<del></del>		FI		ra sista rad
office or n	to the provisions of Sections egistered agent, or both, in t m familiar with, and accept t	the State of Florida. Si	uch change was :	authorized	bv t	the corpora	rporación ition's bo	pard of directors. I hereby	accept the appo	ointment as reg	jistered
SIGNATURE						t signature requ	ired when r	einstating)	DATE		
SIGNATURE	Signature, typed or printed name of re		cable. (NOT					einstating) ADDITIONS/CHANGES T			
SIGNATURE	Signature, typed or printed name of re	egistered agent and title if applic	cable. (NOT	E: Registered	Agent					ND DIRECTO	RS IN 12
SIGNATURE	Signature, typed or printed name of re OFFICE D POLITIS, DEMETRE	agistered agent and title if applic CERS AND DIRECTO	cable. (NOT	E: Registered	Agent						
SIGNATURE  12. TITLE	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	cable. (NOT	E: Registered  13. 1.1 TIT	Agent LE ME						
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of re OFFICE D POLITIS, DEMETRE	egistered agent and title if applic CERS AND DIRECTO	rable. (NOT RS	E: Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT	Agent LE ME REET TY-ST	t signature requ				☐ Change	Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	cable. (NOT	13. 1.1 TIT 1.2 NA 1.3 ST	Agent LE ME REET TY-ST	t signature requ					
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	rable. (NOT RS	E: Registered 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT	Agent LE ME REET TY-ST	t signature requ				☐ Change	Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	rable. (NOT RS	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA	Agent LE ME REET TY-ST LE ME	t signature requ				☐ Change	Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	cable. (NOT	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI	Agent TLE ME REET TLE ME REET TLE REET	ADDRESS -ZIP ADDRESS				Change	Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	rable. (NOT RS	E: Registered  13. 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI 3.1 TII	Agent TLE ME REET TLE ME REET TY-ST	ADDRESS -ZIP ADDRESS				☐ Change	Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	cable. (NOT	E: Registered  13. 1.1 TII 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA	Agent TLE ME REET TY-ST TLE ME REET TY-SI	ADDRESSZIP ADDRESS T-ZIP				Change	Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	cable. (NOT	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST	Agent TLE ME REET TY-ST TLE REET TY-ST TLE ME REET THE REET	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS				Change	Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFIG  D POLITIS, DEMETRE 3969 NE 163RD STREE	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 3.4 CIT 3.4 CIT 3.4 CIT 3.4 CIT 3.5 CIT 3.7 CIT 3	Agent TLE ME REET TY-ST TLE ME REET TTY-ST TLE REET TTY-ST TLE	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS				☐ Change	Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	cable. (NOT	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT	Agent TLE ME REET TY-ST TLE ME REET TY-ST TLE TY-ST TLE TY-ST TLE	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS				Change	Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI 4.1 TIT 4.2 N/	Agent TLE ME REET TLE ME REET TLE ME TLE TLE TLE TLE TLE TLE TLE TLE TLE TL	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP				☐ Change	Addition Addition
SIGNATURE  12.  IIILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST	Agent TLE ME REET TLE ME REET TLE ME REET TLE ME REET TLE AME REET REET REET REET REET REET REET RE	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS				☐ Change	Addition Addition
SIGNATURE  12.  IIILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI 4.1 TIT 4.2 N/ 4.3 ST 4.4 CI	Agent ILE ME REET ILE ME REET ITY-SI ILE ME REET ITY-SI ILE AME REET ITY-SI ILE AME REET ITY-SI	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS				☐ Change	Addition Addition
SIGNATURE  12.  IIILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST	Agent ILE ME REET ILE ME REET ITY-SI ILE ME REET ITY-SI ILE AME REET ITY-SI ILE	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS				☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
SIGNATURE  12.  IIILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 N/ 4.3 ST 4.4 CI 5.1 TIT 5.2 NA	Agent LE REET TY-ST TLE AME REET TY-ST TLE AME REET TY-ST TLE AME	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS				☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 N/ 4.3 ST 4.4 CI 5.1 TIT 5.2 NA	Agent LE ME REET LE ME REET TY-ST LE ME REET TY-ST LE AME REET TY-ST LE AME REET TY-ST	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS -ZIP ADDRESS -ZIP				☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
SIGNATURE  12.  IIILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	DELETE  DELETE  DELETE	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 4.4 CIT 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST	Agent TLE ME REET TY-ST TLE ME REET TY-ST TLE ME REET TY-ST TLE AME REET TY-ST TLE AME REET TY-ST TLE TREST TLE TREST TLE TREST TLE TREST TLE TREST TLE TREST TY-ST	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS -ZIP ADDRESS -ZIP				☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
SIGNATURE  12.  IIILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFIGURE SIGNATURE OF PRINCIPLE STATES OF PRINCIPLE STATES OF THE STATES	egistered agent and title if applic CERS AND DIRECTO	Cable. (NOT PRS   DELETE   DEL	E: Registered  13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 N/ 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI 5.4 CI 5.5 ST 5.5 ST 5.4 CI 5.5 ST 5.5 ST 5.5 ST 5.4 CI 5.5 ST	Agent TLE ME REET TY-ST TLE ME REET TY-ST TLE AME REET TY-ST TLE AME REET TY-ST TLE TY-ST TLE TY-ST TLE	ADDRESS -ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS -ZIP ADDRESS -ZIP				Change  Change  Change	Addition Addition Addition Addition

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 attagment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-607-8662