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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400034670

1. Corporation Name

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90056 012 ***150.00

TOPPER	REALTY, INC.						
Principal Place	e of Business	Mailing Address			- 1 18014801 (10 1814 9191 0811 0811	PD 111 08188	10011 0011 1001
Principal Place of Business 13540 N FLORIDA AVE #103-5		13540 N FLORIDA AVE #103-5					
TAMPA FL 3361	13	TAMPA FL 33613				IN THIS SPACE	
U\$		US 			3. Date Incorporated or Qualifed 05/09/1994		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	<u> </u>	oplied For
21			1- /	<u></u> -	59-3241435		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional equired
City & Stat	te ·	City & State			6. Election Campaign Financing	□ \$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owes the currer		_
24	25	1 L	30		Personal Property Tax.	Yes	₽ No
	9. Name and Address of Curre	ent Registered Agent	lad.		10. Name and Address of New Re	gistered Agent	
TOD	PER, BARRY R		81 Na	ime			
	E 131 ST AVENUE		82 Str	eet Addre	ss (P.O. Box Number is Not Acceptable	le)	
	= : :						
IAM	IPA FL 33612		83				J
			84 Cit	v		85 Zip	Code
		. ·	[[•	<u> </u>	FL SI ZI	•
office or r	registered agent, or both, in the Stat	te of Florida. Such change was aut	thorized by the o	corporation	n's board of directors. I hereby accept	the appointment as re	egistered
agent. I a	am familiar with, and accept the oblig	gations of, Section 607.0505, FIORIC	da Statutes. Registered Agent signa		ration submits this statement for the pin's board of directors. I hereby accept when reinstating) ADDITIONS/CHANGES TO OFFI	DATE .	
agent. I a SIGNATURE 12.	am lamiliar with, and accept the obliging signature, typed or printed name of registered at OFFICERS A	gations of, Section 607.0505, Fioric	da Statutes.		when reinstating)	DATE .	
agent. I a SIGNATURE 12.	Signature, typed or printed name of registered as OFFICERS A	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F	Registered Agent signa 13. 1.1 TITLE		when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
Agent. Fa	Signature, typed or printed name of registered as OFFICERS A PD TOPPER, JUANEL H	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F	Registered Agent signa 13. 1.1 TITLE 1.2 NAME	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered as OFFICERS A TOPPER, JUANEL H 307 3 131ST AVENUE	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F	Registered Agent signa 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDF	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered as OFFICERS A PD TOPPER, JUANEL H	gent and title if applicable. (NOTE: F	Registered Agent signa 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered as OFFICERS A TOPPER, JUANEL H 307 3 131ST AVENUE	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered at OFFICERS AT TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: F	Registered Agent signa 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered at OFFICERS AT TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: F	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered at OFFICERS AT TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: F	Registered Agent signa 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ature required	when reinstating)	DATE CERS AND DIRECTO	ORS IN 12
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered at OFFICERS AT TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP	ature required	when reinstating)	DATE CERS AND DIRECTO ☐ Change ☐ Change	DRS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered as OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ature required	when reinstating)	DATE CERS AND DIRECTO ☐ Change ☐ Change	DRS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered as OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signa 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR	ature required	when reinstating)	DATE CERS AND DIRECTO ☐ Change ☐ Change	ORS IN 12 Addition Addition
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered as OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ature required	when reinstating)	DATE CERS AND DIRECTO ☐ Change ☐ Change	ORS IN 12 Addition Addition
Agent. 1 a 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	Signature, typed or printed name of registered as OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.7 TITLE 3.7 NAME 3.8 STREET ADDR 3.8 STREET ADDR 3.9 STREET ADDR 3.9 STREET ADDR 3.9 STREET ADDR 3.1 CITY-ST-ZIP	ature required	when reinstating)	CERS AND DIRECTO	DRS IN 12 Addition Addition
Agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered a OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 3.4 CITY-ST-ZIP 4.1 TITLE	RESS	when reinstating)	CERS AND DIRECTO	DRS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 4.1 TITLE 4.2 NAME 4.3 STREET ADDR 4.3 STREET ADDR	RESS	when reinstating)	CERS AND DIRECTO	DRS IN 12 Addition Addition
Agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered a OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	RESS	when reinstating)	CERS AND DIRECTO	DRS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 4.1 TITLE 4.2 NAME 4.3 STREET ADDR 4.4 CITY-ST-ZIP 4.5 TITLE 4.2 NAME 4.3 STREET ADDR 4.4 CITY-ST-ZIP 4.4 CITY-ST-ZIP	RESS	when reinstating)	CERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered at OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 4.1 TITLE 4.2 NAME 4.3 STREET ADDR 4.4 CITY-ST-ZIP 5.1 TITLE	RESS RESS	when reinstating)	CERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered at OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 4.1 TITLE 4.2 NAME 4.3 STREET ADDR 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	RESS RESS	when reinstating)	CERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered at OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: FAND DIRECTORS DELETE DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDR 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDR 5.3 STREET ADDR 5.3 STREET ADDR	RESS RESS	when reinstating)	CERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
AGENT. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered at OFFICERS A PD TOPPER, JUANEL H 307 3 131ST AVENUE TAMPA FL	gent and title if applicable. (NOTE: F AND DIRECTORS DELETE DELETE DELETE	Registered Agent signs 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDR 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDR 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDR 4.1 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDR 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDR 5.4 CITY-ST-ZIP 5.5 TITLE 5.2 NAME 5.3 STREET ADDR 5.4 CITY-ST-ZIP 5.5 TITLE 5.5 NAME 5.5 STREET ADDR 5.6 CITY-ST-ZIP	RESS RESS	when reinstating)	DATE CERS AND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition

6.4 CITY-ST-ZIP 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, with all other like empowered.