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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

P94000043204 (4)

TOP SEED INC.

FILED Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7670 PALM RD 2620 PALM RD LAKE CLARKE SHORES FL 33406 LAKE CLARKE SHORES FL 33406 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/06/1994 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0494072 21 7670 PAlm Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be LOKY CLANKY Trust Fund Contribution Added to Fees 23 Country This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZAMORA, JUAN C 742 EL VEDADO 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33405 83 RA City 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 office 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. (NOTE: Registered Agent signature required when reinstaling) Signature, typed or printed hame of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 DELETÉ Change TITLE D 1.1 TITLE ___ Addition ZAMORA, JUAN C ZAMORA JUAN C NAME 1.2 NAME palm Rd 742 EL VEDADO STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33405 Clarke Shores CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE PEREZ, ERNESTO J NAME 2.2 NAME 853 KAYE ST STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33405 CITY-ST-ZIP 2. 4 CITY - ST- ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE . 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-\$1-ZIP 5.4 CITY - ST - ZIP DELETE Change ■ Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 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.

1-5-98 561-641-0787