

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000033407
 1. Entity Name
 TOP NOTCH CONCRETE, INC.



Principal Place of Business Mailing Address
 1194 OLD DIXIE HIGHWAY #20 PO BOX 7033
 LAKE PARK, FL 33403 WEST PALM BEACH, FL 33405



03092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0744014	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CRAMER, HARRIS LLP
 1555 PALM BEACH LALKES BLVD
 SUITE 310
 WEST PALM BEACH, FL 33401

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000465890 03/22/06-00054-014 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT FENNELL, R. BRIAN 1194 OLD DIXIE HIGHWAY #20 LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MCCOLGIN, TODD C 1194 OLD DIXIE HIGHWAY #20 LAKE PARK, FL 33403
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE: Todd C McColgin Date: 3-6-06 Daytime Phone #: 5617413360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR