2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State
04-28-2004 90273 013 ***150.00

DOCUMENT # P97000051511

1. Entity Name
TOPPS CONTRACTORS, INC.

Principal Place of Business	Mailing Address
3277 SW 14TH PLACE BOYNTON BEACH FL 33426	3277 SW 14TH PLACE BOYNTON BEACH FL 33426

MOORE CR2E034 (11/03)

2. Principal Place of Business	3. Mailing Address
210 SE 12 AVE	210 SE 12 AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BOYNTON BCH, FL	City & State: BOYNTON BCH, FL
Zip: 33435 Country: P.B.	Zip: 33435 Country: PB

4. FEI Number 65-0752961 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHERBAN, ROBERT
3277 SW 14TH PLACE
BOYNTON BEACH FL 33426

7. Name and Address of New Registered Agent

Name: ROBERT SCHERBAN
Street Address (P.O. Box Number is Not Acceptable): 210 SE 12 AVE
1
City: BOYNTON BCH FL Zip Code: 33435

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: Robt J. Sch 4/13/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRES. SHCERBAN, ROBERT 1918 LAKE SHORE DRIVE DELRAY BEACH FL 33444	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JASKIEWICZ, EDWARD 7400 ROSEWOOD CIRCLE BOCA RATON FL 33487	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. PRES. WILLIAM MURRAY 27 S.W. 9 AVE. BOCA RATON, FL 33486	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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 an address, with all other like empowered.

SIGNATURE: Robt J. Sch ROBERT S. SCHERBAN 4/13/04 561-733-5177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #