SIGNATURE:

FILED AMOUNT DUE ON OR BEFORE OBMS/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Jul 14, 1999 8:00 am **PROFIT** FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 07-14-1999 90013 022 \*\*\*150.00 DIVISION OF CORPORATIONS 1999 DOCUMENT # P98000067664 CONVERTIBLE TOPS, INC. Mailing Address Principal Place of Business 3619 W. CYPRESS ST. 3619 W. CYPRESS ST. TAMPA FL 33607 TAMPA FL 33607 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 08/03/1998 2. Principal Place of Business 2a. Malling Address 4. FEI Numbe Applied For 59-3289 Not Applicable 21 Suite, Apt. #, etc. \$8.7.5. Additional Suite, Apt. #, etc. Fee Required 22 \$5.00 May Be City & State City & State Election Campaign Financing Trust Fund Contribution Added to Fees 23 Country ZIP Country ZID This corporation owes the current year Intangible Personal Property. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 82 3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132 83 84 FL 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.

SIGNATURE

SIGNATURE SIGNATURE (NOTE: Registered Agent signature requi-OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. 1.1 TITLE Change Addition TITLE DELETE CR2E034 1.2 NAME JACKSON, ANNIE NAME STREET ADDRESS 3619 W. CYPRESS ST. 1.3 STREET ADDRESS TAMPA FL 33607 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE mn€ 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIF 3.1 TITLE Change Addition TITLE DELETE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition 4.1 TITLE TITLE DELETE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition 6 1 TITLE mie DELETE 6 2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 cath; 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 13 if changed, or on all attachment with an address.

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June Josepson

## Classic Auto Interiors & Access

4901 N. ARMENIA AVE. TAMPA, FLORIDA, 33603 . PHONE (8

Divinion of Corporations-P.O. Box 16327 Tollahance, FL 32314

Towhon it way concern:

I am sending the two checks for Convertible Top Center and Claric Anto Interiors along with the information sheets from the (second notice) packet. All of this was sent on March 9, 1999 along with the cheek and information for our other corporation, Sip P Corp. of Central Florida. Evidently the information and checks for Convertible Top Center and Claric were lost in the waif. I don't know how one envelope out of three can get through the wail and the other two get lost. I am sending these chechs/papers together.