## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

511115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED DOCUMENT # P99000016958 Jul 24, 2000 8:00 am 1. Entity Name TOPTREZ, INC. **Secretary of State** 07-24-2000 90007 026 \*\*\*150.00 Principal Place of Business Mailing Address 14832 SW 166 STREET 14832 SW 166 STREET MIAMI FL 33187 **MIAMI FL 33187** 3. Mailing Address 2. Principal Place of Business 13727 S.W. 152 Street Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE <del>-#-10</del> City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent rezona MAAS, JOHN P ESQ. Street Address (P.O. Box Number is Not Acceptable) 44 NE 16 STREET HOMESTEAD FL 33030 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 SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition ☐ Delete TITLE TITLE Trezona, Donald G. TREZONA, DONALD G NAME 14832 SW 166 Street STREET ADDRESS STREET ADDRESS 14832 SW 166 STREET CITY-ST-ZIP CITY-ST-ZIP Miami Fla 33185 MIAMI FL 33187 Change ☐ Addition TITLE TITI F ☐ Delete Topercer, William Drive NAME TOPERCER, WILLIAM NAME STREET ADDRESS STREET ADDRESS 12 HARBOR ISLAND DRIVE argo Fla 33037 CITY-ST-ZIP CITY-ST-7IP KEY LARGO FL 33037 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. . ". 13. 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 11 or Block 12 if

P9900016958(AHardment)

Abbla697

## Toptrez, Inc. 13727 S.W. 152 Street, #107 Miami, Florida 33177 (305) 252-2320

July 13, 2000

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

RE: 65-0895705

To Whom It May Concern:

Enclosed with this report is a check for \$150.00 instead of \$550.00. I had called your office last week and asked them to mail me the form due to the fact that I had never received one.

I received a call from my accountant about two weeks ago and he informed me that we were not on file as a Corporation. I never even realized it until he called me. Upon receiving his phone call, I immediately phoned your offices and requested that they send me the form to fill out. The lady I spoke with said that I should include this letter explaining that we never received the form originally.

Please advise. I can be reached at (305) 252-2320.

Thank.vou

Elisa C. Trezona

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