

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000041724

1. Entity Name
TOPPEL ACQUISITION CORP.



Principal Place of Business
7900 GLADES ROAD
SUITE 600
BOCA RATON, FL 33434

Mailing Address
7900 GLADES ROAD
SUITE 600
BOCA RATON, FL 33434



01062006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0934954

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SAUER, SHERILYN
7900 GLADES RD.,
SUITE 600
BOCA RATON, FL 33434

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IN THIS SPACE**

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

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, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME TOPPEL, HAROLD
STREET ADDRESS 7900 GLADES ROAD, SUITE 600
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE VPD
NAME TOPPEL, MICHAEL
STREET ADDRESS 7900 GLADES ROAD, SUITE 600
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE VPD
NAME TOPPEL, JONATHAN
STREET ADDRESS 7900 GLADES ROAD, SUITE 600
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE S
NAME SAUER, SHERI
STREET ADDRESS 7900 GLADES ROAD, SUITE 600
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE T
NAME KASSEBAUM, KEVIN
STREET ADDRESS 7900 GLADES ROAD, SUITE 600
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael ToppeL 3/02/06

Date

561-451-469

Daytime Phone #