FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S19949** **(4)**

1. Corporation Name
TOP BRANCH MAINTENANCE, INC.

Principal Place of Business
~~7070 HILLSBORO CANAL RD~~
~~POMPANO BEACH FL 33067~~

Mailing Address
~~7070 HILLSBORO CANAL RD~~
~~POMPANO BEACH FL 33067~~

3. Date Incorporated or Qualified: 12/20/1990
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21 9437 STATE ROAD 7
22 Suite, Apt. #, etc.
23 City & State: BOYNTON BEACH FL
24 Zip: 33437
25 Country: USA

2a. Mailing Address
26 9437 STATE ROAD 7
27 Suite, Apt. #, etc.
28 City & State: BOYNTON BEACH FL
29 Zip: 33437
30 Country: USA

4. FEI Number: 65-0233343 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
SOOWAL, LOIS J.
~~7070 HILLSBORO CANAL RD~~
~~POMPANO BEACH FL 33067~~

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 9437 STATE ROAD 7
83
84 City: BOYNTON BEACH FL
85 Zip Code: 33437

11. Pursuant to the provisions of Sections 607.0502 and 607.1604, 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, typed or printed name of registered agent (Section 607.0505, F.S.) — (For the Registered Agent signature to be valid, it must be dated) — DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	SOOWAL, ANDREW H.	
STREET ADDRESS	~~7070 HILLSBORO CANAL RD~~	
CITY-ST-ZIP	~~POMPANO BEACH FL~~	
TITLE	D	☐ DELETE
NAME	SOOWAL, LOIS J.	
STREET ADDRESS	~~7070 HILLSBORO CANAL RD~~	
CITY-ST-ZIP	~~POMPANO BEACH FL~~	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	9437 STATE ROAD 7	
1.4 CITY-ST-ZIP	BOYNTON BEACH FL 33437	
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	9437 STATE ROAD 7	
2.4 CITY-ST-ZIP	BOYNTON BEACH FL 33437	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lois Soowal, owner (LOIS SOOWAL) — 4/29/96 — 407-731-2966
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)