FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT '. CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

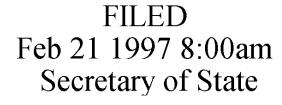
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$68363

(8)

TOPMARK MARKETING, INC.





Principal Place of Business Mailing Address 2440 CORAL WAY 2440 CORAL WAY MIAMI FL 33145 MIAMI FL 33145-3410					····				
						3. Date Incorporated or Qualified 07/24/1991	3a. D	ate of Last R /02/1996	leport
<u> </u>	lace of Business	2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·	4, FEI Number 65-0276709		Ar	pplied For
Suite, Apt	# etc	26 Suite, Apt. #, etc.				03-02/01/09			ot Applicable Additional
22	.,	27				Certificate of Status Desired			equired
City & State	0	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cou	intry		8. This corporation has liability for	intangible	e tax under s	
24	25	29	30				Yes		
DW16	9. Name and Address of Curr	ent Registered Agent		81	Name	10, Name and Address of New Re	gistered	Agent	
	D, RAUL F. D CORAL WAY			B2			·		
MA				Street Addre	ess (P.O. Box Number is Not Acceptate	ole)			
				63		······································	***************************************		
				84	City			85 Zip	Code
					•		<u>Fl</u>		1
11. Pursuant office or r agent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida Sta te of Florida Such change wa igations of, Section 607.0505.	itutes, the al as authorized Florida Stat	bove d by lutes	-named corpo the corporation.	oration submits this statement for the points board of directors. I hereby accept	ourpose of the ap	of changing II pointment as	ts registered registered
SIGNATURE									
	Signature, typed or printed name of registered a			d Age	nt signature require	d when reinstating)	DATE		
12.	PVT OFFICERS A	ND DIRECTORS DELETE	13. 1.1 Ti	T. E	·	ADDITIONS/CHANGES TO OFFIC	JERS AN	Change	Addition
NAME	GOMEZ, PABLO	L_ otter	1.2 N/		1				PIGORIGII
STREET ADDRESS	2600 SW 3RD AVE 850		1		ADDRESS				
CHY-ST-ZIP	MIAMI FL		1.4 CI						
TITLE	SD	DELETE	2.1 %					Change	Addition
NAME	GOMEZ, PABLO		2.2 N/	AME					
STREET ADDRESS	2600 SW 3RD AVE 850		2.3 \$1	TREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL	LIBRIGA			31- 2 1P			The Change	- Addition
TITLE		DELETE	3.1 Ti			•		Change	Addition
NAME CTOCKY ADDRESS			3.2 N/		ADDRESS		•		
STREET ADDRESS CITY+ST-7IP					ALURESS ST-ZIP				
TITLE		DELETE	4.1 T)		<u>,, -, , , , , , , , , , , , , , , , , ,</u>	<u></u>		Change	Addition
NAME			4. 2 N	IAME					
STREET ADDRESS			4.3 ST	TAEET	ADDRESS				
CITY-ST-7#			4.4 CI	TY-S	T-ZIP		· · · · · · · · · · · · · · · · · · ·		
1/1LE	·	☐ DELETE	5.1 TI					Change	Addition
NAME			5.2 N/			•			
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CI		1-ZIP			Change	Addition
TITLE		L_ Dereit	6.1 TI		}			E CHENGE	LT AUDICION
NAME CINCET ANGIDESS			6.2 N/		ADDRESS				
STREET ADDRESS			6.4 C						
CITY-ST-ZIP			0.4 U	111-0	1 - TSL				,

14. I do 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 oath; that I am an officer or director of the corporation or the repeiver 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 o

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