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May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90024 048 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000008131

1. Corporation Name  
TOY BUILDERS, INC.



Principal Place of Business 13170-58 ATLANTIC BLVD. SUITE 153 JACKSONVILLE FL 32225  
Mailing Address 13170-58 ATLANTIC BLVD. SUITE 153 JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21  
Suite, Apt. #, etc. 22  
City & State 23  
Zip 24 Country 25  
2a. Mailing Address 26  
Suite, Apt. #, etc. 27  
City & State 28  
Zip 29 Country 30

3. Date Incorporated or Qualified 01/18/1994  
4. FEI Number 59-3218350 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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent  
TOY, STANLEY R  
1555 N. CARBONDALE DR.  
JACKSONVILLE FL 32208

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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 Stanley R. Toy VPS DATE 4-25-99

12. OFFICERS AND DIRECTORS  
TITLE P  
NAME TOY, C. GEORGETTE  
STREET ADDRESS 1555 N. CARBONDALE DRIVE  
CITY-ST-ZIP JACKSONVILLE FL 32208  
TITLE VPS  
NAME TOY, STANLEY R  
STREET ADDRESS 1555 N. CARBONDALE DRIVE  
CITY-ST-ZIP JACKSONVILLE FL 32208

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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 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, with all other like empowered.

SIGNATURE: Stanley R. Toy DATE 4-25-99 DAYTIME PHONE # 904-993-1328

CR2E034 (1/198)