2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2008 08:00 A Secretary of State

ANNUAL REPORT				Apr 07, 2008 08:			
DOCUMENT # S10979 1. Entity Name EL PALACIO DE LOS JUGUETES, INC.				**	2	Secretary o	if S
Principal Place 1702 W 68 HIALEAH, FI		Mailing Address 1702 W 68 ST HIALEAH, FL 33014		1 100 (12) 10 (10)	772/1 00/10 10/14 100/10 10/1		12 (186 2
DO NOT WRITE IN THIS SPA			CE	03272008 4. FEI Number 65-0231	No Chg-P	CR2E034 (11/05) Applied Not Ap \$8.75 Additions Fee Required	d For plicable
MAYA, LUIS 2796 W 72 ST HIALEAH, FL 33016			DO NOT WRITE IN THIS SPACE				
the obliga	Signature, typed or printed name of registered agent and		id Agent signature required		i, in the State of Flori	da. I am famitiar with, and	accept
After M	.E NOW!!! FEE IS \$150.00 lay 1, 2008 Fee will be \$550.00			led to Fees			
10. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MAYA, LUIS 2796 W 72 ST HIALEAH, FL	RECTORS			U00000 04/17/08-	984649 80052-011 150.	00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			DO NOT WRITE IN THIS SPACE				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE							

12. Thereby certify that the Normalon supplies 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 of supplies that I am an officer or director of the corporation or the received or trissee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an officer or director.

SIGNATURE: 🔀

NAME... --STREET ADDRESS CITY+ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-04 1305)878-1986