

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **B98000000199**

1. Entity Name

Hasbro Latin America, LP

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 AUG 14 AM 10: 02

Principal Place of Business

Mailing Address

1027 Newport Avenue

Pawtucket, R.I. 02862

2. Principal Place of Business

12000 Biscayne Blvd.

Suite, Apt. #, etc.

300

City & State  
Miami, Fla.

Zip  
33181

Country

3. Mailing Address

1027 Newport Ave.

Suite, Apt. #, etc.

ATT: General Counsel

City & State  
Pawtucket, R.I.

Zip  
02862

Country

4. FEI Number  
05-0498191

Applied For  
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Corporation Service Co.  
120 Hays Street  
Tallahassee, Fla. 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record. \$10,000.00

10. Amount of Capital Contributions in FLORIDA to date. \$10,000.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # **F98000001863**  
NAME **Hasbro Latin America Holding**  
STREET ADDRESS **1027 Newport Avenue**  
CITY-ST-ZIP **Pawtucket, R.I. 02862**

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STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

800003370138--6  
-08/23/00--01101--013  
\*\*\*\*158.75 \*\*\*\*158.75

STREET ADDRESS

CITY-ST-ZIP

800003370138--6  
-08/23/00--01101--014  
\*\*\*\*400.00 \*\*\*\*400.00

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/11/00

Date

401-727-5211

Daytime Phone #

Harold Gordon, V.P., Hasbro Latin America Holdings, Inc.

CR2E003 (9/99)