2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Dellisit

FILED DOCUMENT # F02000001222 1. Entity Name 06 MAY 31 AM 11: 14 MATTEL LATIN AMERICA HQ, INC. Principal Place of Business Mailing Address 333 CONTINENTAL BOULEVARD 333 CONTINENTAL BOULEVARD EL SEGUNDO, CA 90245 EL SEGUNDO, CA 90245 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212006 Chg-P CR2E034 (11/05) Applied For 4. FEI Number City & State City & State 61-1407177 Not Applicable Country \$8.75 Additional Zip Country \Box 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. Signeture, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition ☐ Detete TITLE TITLE 200076304502 WEISENBURGER, GUY NAME NAME 06/19/06--01005--018 **550.00 STREET ACCRESS 333 CONTINENTAL BOULEVARD STREET ADDRESS CITY-ST-ZIP EL SEGUNDO, CA 90245 CITY-ST-7IP CLARA WONG - V. P. ☐ Change Delete TITLE TITLE 333 CONTINENTAL BLUD. DICKSON, CARY NAME NAME EL SEGUNDO, CA 90245 STREET ADDRESS 333 CONTINENTAL BOULEVARD STREET ADDRESS CITY-ST-ZIP EL SEGUNDO, CA 90245 CITY-ST-ZIP SD ☐ Delete TITLE Change ☐ Addition TITLE NORMILE, ROBERT NAME NAME 333 CONTINENTAL BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP EL SEGUNDO, CA 90245 CITY-ST-ZIP Change ☐ Addition Delete TITLE GELBART, RENEE NAME NAME 333 CONTINENTAL BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP EL SEGUNDO, CA 90245 CITY-ST-ZIP DIRECTOR Addition Change Defete TITLE NORMAN GHOLSON O'BRIEN, CHRISTOPHER NAME NAME BLUP. 933 CONTINENTAL 333 CONTINENTAL BOULEVARD STREET ADDRESS STREET ADDRESS SEGUNDO, CA 90245 CITY-ST-ZIP EL SEGUNDO, CA 90245 CITY+ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ASSISTANT SECRETARY 5-25-06 (310) 252-4859