2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED **DOCUMENT # F05000007404** 1. Entity Name . 06 DEC 11 PM 3: 25 HASBRO LATIN AMERICA, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1027 NEWPORT AVENUE 1027 NEWPORT AVENUE PAWTUCKET, RI 02862 PAWTUCKET, RI 02862 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **7**1082006 REIN-P CR2E098 (11/05) 4. FEI Number Applied For City & State City & State 05-0492120 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registrating the presentation of the purpose of changing its registrating the presentation of the State of Florida. I am familiar with, and accept Vice President SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2007, Fee will be \$300.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. ©Change 600092634226 CP ☐ Delete TITLE Addition TITLE VERRECCHIA, ALFRED J NAME NAME STREET ADDRESS 12/19/06--01018--005 **150.00 **1011 NEWPORT AVENUE** STREET ADDRESS CITY-ST-ZIP PAWTUCKET, RI 02862 CITY-ST-ZIP FVP ☐ Change ☐ Delete TITLE ☐ Addition TITLE GOLDNER, BRIAN NAME NAME STREET ADDRESS STREET ADDRESS 1011 NEWPORT AVENUE CITY-ST-ZIP PAWTUCKET, RI 02862 CITY-ST-ZIP VPS ☐ Change ☐ Addition Delete TITLE TITLE NAME NAGLER, BARRY NAME STREET ADDRESS STREET ADDRESS 1011 NEWPORT AVENUE CITY-ST-ZIP PAWTUCKET, RI 02862 CITY-ST-7IP ☐ Change ☐ Addition Delete TITLE TITLE HARGREAVES, DAVID D.R. NAME NAME STREET ADDRESS STREET ADDRESS 1011 NEWPORT AVENUE PAWTUCKET, RI 02862 CITY-ST-ZIP CITY-ST-ZIP Change Addition VPT ☐ Delete TITLE TREUB, MARTIN R NAME NAME 200 NARRAGANSETT PARK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PAWTUCKET, RI 02862 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE THOMAS SLATER, DEBORAH NAME NAME 200 NARRAGANSETT PARK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PAWTUCKET, RI 02862 12. I hereby certify that the information supplied with this filling 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. 11-9-06 SIGNATURE: Barry Nagler. Sr. Vice President, General Counsel and Secretary Daytirne Phone