2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000005973

Entity Name

FLORIDA KEYS TOYS LLC

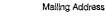
Principal Place of Business

HIGHLAND PARK PLACE 18TH FLOOR 4514 COLE AVE.

4514 COLE AVE. DALLAS, TX 75205-4185



FILED
Jan 17, 2006 08:00 AM
Secretary of State



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HIGHLAND PARK PLACE 18TH FLOOR 4514 COLF AVE.

4514 COLE AVE. DALLAS, TX 75205-4185



01112006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 46-0476135 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Deytime Phone #

6. Name and Address of Current Registered Agent

BOYLE, CONRAD J ESQ. 500 EAST BROWARD BLVD. SUITE 1950 FT. LAUDERDALE, FL 33394

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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.		
SIGNATURE_	Signature, typed or printed name of registered agent and bite # applicable. (NOTE, Register	and Agent signature required when relastating) DAJE
Filing Fee is \$50.00 Due by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS	
NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANSON, FRANK 4514 COLE AVE #1800 HIGLAND PARK PL DALLAS, TX 75205	U000003 89359 01/20/06-80045-003 55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANSON, DEBBIE 4514 COLE AVE #1800 HIGHLAND PARK PL DALLAS, TX 75205	
title Name Street address City-St-Zip		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TATLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS GITY-ST-ZIP		
11. 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 inclicated 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE