FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # LO4445

(7)

PRESTIGE TOYS, INC.

FILED May 06 1997 8:00am Secretary of State



| Principal Place of Business | | Mailing Ad | Mailing Address | | | i iffalitet att Auter biate binte niner bill diell ninte nabet dien dien tant | | | | | |
|---|---|--|---|------------------------|---|---|--|---|--------------------------------|----------------|--|
| % ROBERT E. SPENCE \$100 DUPONT BLVD., PENTHOUSE C. FT. LAUDERDALE FL 33308 | | 5100 DUP | % ROBERT E. SPENCE 5100 DUPONT BLVD., PENTHOUSE C. FT. LAUDERDALE FL 33308-4332 | | | | | | | | |
| | | | | | | | 3. Date incorporated or Qualified 07/24/1989 | | of Last I 6/1996 | | |
| 2. Principal Pi | ace of Business | 2a. Mailing | 2a. Mailing Address | | | 4. FEI Number | | Α | pplied For | | |
| 21 | | 26 | 26 | | | 65-0141350 | Not Applicable | | | | |
| Sulte, Apt. #, etc. | | Suite, 2 | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | | |
| City & State | | City & | State | | | | 6. Election Campaign Financing | | \$5.00 | May Be | |
| 23 | | 28 | 28 | | | | Trust Fund Contribution | Added to Fees | | | |
| Zip | Country | Zip | | Country | | | | ty for intangible tax under s. 199.032, | | | |
| 24 | 25 | 29 | | 30 | | | | Yes 🗌 | | | |
| | 9. Name and Address of Curre | nt Registered A | gent | | | | 10. Name and Address of New Reg | istered A | genl | | |
| | NCE, ROBERT E. | | | | 81 | Name | | | | ŀ | |
| | D DUPONT BLVD. | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | le) | | | |
| PEN | THOUSE C | | | | | | | | | | |
| FT. | LAUDERDALE FL 33308 | | | 1 | 83 | • | | | | | |
| | | | | | 84 | City | | | B5 Zip | Code | |
| | | | | | | • | | FL | | | |
| 11. Pursuant t | o the provisions of Sections 607.050 | 02 and 607.1508 | 3. Florida Statut | es, the a | bove | named corp | poration submits this statement for the p tion's board of directors. I hereby accep | urpose of o | hanging | its registered | |
| office or re | egistered agent, or both, in the State m familiar with, and accept the oblic | e of Florida, Suci ations of, Section | n change was a xn 607.0505. Flo | autnonze orida Stat | a by lutes | the corporat | tion's board of directors. I hereby accep | t the appo | intment a | s registorea | |
| SIGNATURE | | , | | | | | | | | | |
| SIGNATURE | Signature typed or printed name of registered ag | ont and title if applicat | de (NO) | l : Registers | d Ager | nt signature requi | rod when reinstating) | DATE | | | |
| 12. | OFFICERS AN | ID DIRECTORS | | 13, | | | ADDITIONS/CHANGES TO OFFIC | | | | |
| TITLE | D | | DELETE | 1.1 10 | 11.6 | | | Ĺ | Change | Addition | |
| NAME | SPENCE, ROBERT E. | | | 1.2 N | AME | | | | | ŀ | |
| STREET ADDRESS | 5100 DUPONT BLVD | | | 1.3-53 | REET A | ADDRESS | | | | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL | | | 1.4(0) | TY-ST | 1 - ZIP | | | | | |
| TITLE | D | | DELETE | 217 | TLF | | | | Change | Addition | |
| NAME | AME SPENCE, DARLENE C. | | | 2.2 NAME | | Ì | | | | | |
| STREET ADDRESS | 5100 DUPONT BLVD | | | 2.3 5 | IREET A | ADDRESS | | | | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL | | | 2.40 | HY-S | 1-ZIP | | | | ļ | |
| TITLE | | | DELETE | 3.1 11 | TLE | | | | Change | Addition | |
| NAME | | | | 3.2 N | AME | | | | | ŀ | |
| STREET ADDRESS | | | | 3.3 5 | REET I | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 3.4 0 | ITY-S | T-ZIP | | | | | |
| TITLE | 444. | | DELFTE | 4.1 1 | | | | | Change | Addition | |
| NAME | | | | 4.21 | IAME | \ | | | | ſ | |
| STREET ADDRESS | | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | TY-\$1 | 1 | | | | | |
| TITLE | | | DELETE | 51 JI | | | | | Change | Addition | |
| NAME | | | | 5.2 N | | | | | J - | - | |
| STREET ADDRESS | | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | | | | | |] | |
| TITLE | | - | DELETE | 6.1] | 114-51 114 | 1 - 111, | | | _ Change | Addition | |
| | | | La Diccie | | | | | L | Onange | CJ Noomon | |
| NAME | | | | 6.2 N | | 4000000 | | | | } | |
| STREET ADDRESS | | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 6.4 Ç | 114-51 | 1 - 71P | | · | | | |

1. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or in an attachment with an address.