

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 8:00 am
Secretary of State

01-23-2008 90008 035 ***150.00

DOCUMENT # L80630

1. Entity Name
FOREIGN TOYS, INC.



Principal Place of Business

~~4046 NE 6TH AVE~~
~~OAKLAND PARK, FL 33334~~ US

Mailing Address

~~118 LAKE EMERALD DR #307~~
~~FT LAUDERDALE, FL 33334~~

2. Principal Place of Business - No P.O. Box #

4540 NE. 11th AVE

Suite, Apt. #, etc.

3. Mailing Address

4540 NE 11th AVE

Suite, Apt. #, etc.

City & State

OAKLAND PARK, FL

Zip

33334

Country

USA

City & State

OAKLAND PARK, FL

Zip

33334

Country

USA

0112008

Chg-P

CR2E034 (12/06)

4. FEI Number

65-0213225

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

ROWAN, PAUL

~~118 LAKE EMERALD DRIVE #307~~
~~FORT LAUDERDALE, FL 33334~~

7. Name and Address of New Registered Agent

Name

PAUL ROWAN

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

4540 NE 11th AVE

City

OAKLAND PARK

FL

Zip Code

33334

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 title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME **P ROWAN, PAUL** ☐ Delete
STREET ADDRESS **118 LAKE EMERALD DRIVE #307**
CITY- ST- ZIP **FORT LAUDERDALE, FL 33334**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Delete
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STREET ADDRESS
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TITLE
NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **P ROWAN, PAUL** ☒ Change ☐ Addition
STREET ADDRESS **4540 NE 11th AVE**
CITY- ST- ZIP **OAKLAND PARK, FL 33334**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

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TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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.

SIGNATURE:

(954) 537-9070

1/14/08