

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M61152

1. Entity Name

NATIONAL TOY GROUP, INC.

**FILED**  
**Apr 13, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90004 031 \*\*\*158.75

Principal Place of Business

2518 W OAKLAND PARK BLVD.  
OAKLAND PARK FL 33311

Mailing Address

2518 W OAKLAND PARK BLVD.  
OAKLAND PARK FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0968327

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MORAN, W. J  
2518 W OAKLAND PARK BLVD.  
OAKLAND PARK FL 33311

7. Name and Address of New Registered Agent

Name

~~ALAN~~ SHERMAN, ALAN

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

1508 NORTH OCEAN BLVD

City

POMPANO BEACH

FL

Zip Code

33062

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.

SIGNATURE

*Alan Sherman* ALAN SHERMAN, PRESIDENT

4-7-2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P  
NAME MORAN, W. J  
STREET ADDRESS 6277 NE 8TH AVE  
CITY-ST-ZIP FT. LAUDERDALE FL 33334 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME SHERMAN, ALAN  
STREET ADDRESS 1508 NORTH OCEAN BOULEVARD  
CITY-ST-ZIP POMPADO BEACH, FLORIDA 33062 ☒ Change ☐ Addition

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

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

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

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

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

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Alan Sherman* ALAN SHERMAN, PRESIDENT

4-7-2000

(954) 486-2110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #