

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107524

FILED  
Jul 07, 2004  
Secretary of State

Entity Name: TOYALINK ENTERPRISES, INC.

## Current Principal Place of Business:

1821 HARBOR VIEW CIR  
WESTON, FL 33327

## New Principal Place of Business:

1271 CAMELLIA CR  
WESTON, FL 33326

## Current Mailing Address:

1821 HARBOR VIEW CIR  
WESTON, FL 33327

## New Mailing Address:

1271 CAMELLIA CR  
WESTON, FL 33326

FEI Number: 65-1152032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALMANZA, ALVARO E  
1821 HARBOR VIEW CIR  
WESTON, FL 33327

## Name and Address of New Registered Agent:

ALMANZA, ALVARO E  
1271 CAMELLIA CR  
WESTON, FL 33326

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:

07/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: ALMANZA, ALVARO E  
Address: 1821 HARBOR VIEW CIR  
City-St-Zip: WESTON, FL 33327

Title: VT ( ) Delete  
Name: ALMANZA, VICTORIA E  
Address: 1821 HARBOR VIEW CIR  
City-St-Zip: WESTON, FL 33327

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: ALMANZA, ALVARO E  
Address: 1271 CAMELLIA CR  
City-St-Zip: WESTON, FL 33326

Title: VT (X) Change ( ) Addition  
Name: ALMANZA, VICTORIA E  
Address: 1271 CAMELLIA CR  
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALVARO ALMANZA

PS

07/07/2004

Electronic Signature of Signing Officer or Director

Date