FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UER) DOCUMENT # PO200027612 SECRETARY OF STATE DIVISION OF CURPORATIONS 1. Entity Name LITTLE TIKES INC 04 JAN 12 AM 8:00 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 818 N NOWELL STREET Sulte, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ORLANDO, FL 01-0629034 Not Applicable Zip Country Zip ountry \$8.75 Additional Certificate of Status Desired 32808 Fee Required 7. Name and Address of Current Registered Agent -Name.am DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) INTELS SEADE 818 N NOWELL ST Zip Code ORLANDO 8. The above named entity supports this statement for the purpose of quanging its registered office or registered agent, or both, in the 32803 State of Florida. I am familiar with, and accept the obligations of registered agent. IYA EAST 8/15/2003 Signature, typed or printed name of registered egent and title if applicab (NOTE: Registered Agent alignature required when reinstating) January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amerided UBR is \$61.25 DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State rust Fund Contribution, Added to Fees OFFICERS AND DIRECTORS 11. TITI F NAME EAST, IYA ME STREET ADDRESS 818 N NOWELL ST REET ADDRESS CITY-8T-ZIP ORLANDO, FL 32808 Y-ST-ZIP TITLE NAME STREET ADDRESS REET ADDRESS CITY-ST-ZIP Y-ST-ZIP TITLE NAME STREET ADDRESS WEET ADDRESS DO NOT WRITE CITY-ST-ZIP-Y ST ZIP TITLE NTHISSPACE NAME STREET ADDRESS REET ADDRESS Y-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS EET ADDRESS T.ST.ZIP CITY-ST-ZIP TITLE E NAME STREET ADDRESS EET ADDRESS CITY-ST-ZIP Y STAZIP 12. I hereby certify that the information supplied with this filling 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 leceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutee; and that/my name appears in Block 10 or on an attachment with an address, with all other like empowered. SIGNATURE: 🛨 IYA EAST / PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 8/15/2003 Daytime Phone #

August 14, 2003

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

To Whom It May Concern,

This letter is to inform you that LITTLE TIKES, INC., has relocated. The named Corporation did not receive a Annual Corporate Reports, for the year (2003). Due to these circumstances we are asking that you abate the reinstatement fees. The payment of \$150.00 is enclosed. If there are any questions you can contact me at (407) 895-5933. Document.#P02000027612.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,

Maurice Robinson