

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90022 003 ***150.00

DOCUMENT # P03000034573

1. Entity Name
TOYTECH PERFORMANCE, INC.



Principal Place of Business
**12141 S.W. 114 PLACE
MIAMI, FL 33186**

Mailing Address
**12141 S.W. 114 PLACE
MIAMI, FL 33186**

54061498



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03152003

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

16-1679267

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUIZ, FABIO
12141 S.W. 114 PLACE
MIAMI, FL 33186**

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6-30-04

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PSD
RUIZ, FABIO
12141 S.W. 114 PLACE
MIAMI, FL 33186** ☐ Delete

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12141 S.W. 114 PLACE
MIAMI, FL 33186** ☐ Delete

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CITY - ST - ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Fabio Ruiz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-30-04

Date

305-975-0696

Daytime Phone #

Attachments
#PO3000034573
FREEDMAN & COMPANY

Leslie J. Freedman, CPA, P.A. Certified Public Accountants and Consultants

May 21, 2004

Internal Revenue Service
Ogden, UT 84201-0023

Re: Toytech Performance, Inc.
EIN # 16-1679267
Form 2553

Dear Sir/Madam:

We received your notice dated September 11, 2003 regarding Form 2553 – Election by a Small Business Corporation for Toytech Performance, Inc., in which you assigned EIN # 90-0107023 (copy of notice attached). This notice was addressed to Toytec Performance. This name is incorrect.


Your notice dated August 14, 2003 (copy attached) which assigned EIN # 16-1679267 pursuant to our completed Form SS-4, and Form 2553 which was prepared using the EIN # 16-1679267, both reflect the correct name Toytech Performance, Inc.

Please adjust your records to reflect the EIN # 16-1679267 as our permanent number and delete EIN # 90-0107023 from your database.

Thank you for your assistance in this matter.

Sincerely,

FREEDMAN & COMPANY


Leslie J. Freedman, CPA

Enclosures

LJF/mlp

Form **2848**
(Rev. January 2002)
Department of the Treasury
Internal Revenue Service

Attachment
103000034573

Power of Attorney and Declaration of Representative

► See the separate instructions.

540614958

OMB No. 1545-0150

For IRS Use Only

Received by:

Name

Telephone

Function

Date / /

Part I Power of Attorney (Type or print.)

1 Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address

TOYTECH PERFORMANCE, INC.

12141 SW 114 PLACE

MIAMI

FL 33176

Social security number(s)

Employer identification
number

16-1679267

Daytime telephone number

Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

2 Representative(s) must sign and date this form on page 2, Part II.

Name and address

LESLIE J. FREEDMAN

17140 ARVIDA PARKWAY #4

WESTON

FL 333326

CAF No. 6500-02287R

Telephone No. 954-389-8780

Fax No. 954-389-9737

Check if new: Address ☐Telephone No. ☐

Name and address

CAF No.

Telephone No.

Fax No.

Check if new: Address ☐Telephone No. ☐

Name and address

CAF No.

Telephone No.

Fax No.

Check if new: Address ☐Telephone No. ☐

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

3 Tax matters

Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (See the instructions for line 3.)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s)
CORPORATE	SS-4, 2553	2003

4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. Specific uses not recorded on CAF. ☐

5 Acts authorized. The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative, the authority to execute a request for a tax return, or a consent to disclose tax information unless specifically added below, or the power to sign certain returns. See the instructions for Line

5: Acts authorized.

List any specific additions or deletions to the acts otherwise authorized in this power of attorney:

Note: In general, an unenrolled preparer of tax returns cannot sign any document for a taxpayer. See Revenue Procedure 81-38, printed as Pub. 470, for more information.

Note: The tax matters partner of a partnership is not permitted to authorize representatives to perform certain acts. See the separate instructions for more information.

6 Receipt of refund checks. If you want to authorize a representative named on line 2 to receive, BUT NOT TO ENDORSE

OR CASH, refund checks, initial here _____ and list the name of that representative below.

Name of representative to receive refund check(s) ►

For Paperwork Reduction and Privacy Act Notice, see the separate instructions.

Form **2848** (Rev. 1-2002)

Attachment -
PO3000034573

54061498

Form 2848 (Rev. 1-2002)

TOYTECH PERFORMANCE, INC.**16-1679267**

Page 2

7 Notices and communications. Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2 unless you check one or more of the boxes below.

a If you want the first representative listed on line 2 to receive the original, and yourself a copy, of such notices or communications, check this box ☒

b If you also want the second representative listed to receive a copy of such notices and communications, check this box ☐

c If you do not want any notices or communications sent to your representative(s), check this box ☐

8 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here ☐

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

9 Signature of taxpayer(s). If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

▶ **IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.**

Signature

Date

Title (if applicable)

Signature

Date

Title (if applicable)

Print Name

Part II Declaration of Representative

Caution: Students with a special order to represent taxpayers in Qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program, see the separate instructions for Part II.

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Treasury Department Circular No. 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
 - a** Attorney-a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b** Certified Public Accountant-duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c** Enrolled Agent-enrolled as an agent under requirements of Treasury Department Circular No. 230.
 - d** Officer-a bona fide officer of the taxpayer's organization.
 - e** Full-Time Employee-a full-time employee of the taxpayer.
 - f** Family Member-a member of the taxpayer's immediate family (i.e., spouse, parent, child, brother, or sister).
 - g** Enrolled Actuary-enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Service is limited by section 10.3(d)(1) of Treasury Department Circular No. 230).
 - h** Unenrolled Return Preparer-an unenrolled return preparer under section 10.7(c)(viii) of Treasury Department Circular No. 230.

▶ **IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED.**

Designation-Insert above letter (a-h)	Jurisdiction (state) or Enrollment Card No.	Signature	Date
b	FLORIDA	<i>[Signature]</i>	<i>5/21/04</i>

Attachment

24061458

#A03000034573



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
OGDEN UT 84201-0023

DATE OF THIS NOTICE: 09-11-2003
NUMBER OF THIS NOTICE: CP 576 A
EMPLOYER IDENTIFICATION NUMBER: 90-0107023
FORM: 2553 NOBOD 0000000010

FOR ASSISTANCE CALL US AT:
1-800-829-0115

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

TOYTEC PERFORMANCE
12141 SW 114TH PL
MIAMI FL 33176

(Handwritten mark)

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

As we were processing your Form 2553 for tax period 122003, we found that your form didn't have a valid employer identification number (EIN). Our records show no EIN assigned to this business. Since an EIN is required by law, we assigned you EIN 90-0107023. Please keep this notice for your records.

Use your name and EIN exactly as shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIN it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIN.

Every taxpayer must figure taxable income on the basis of an annual accounting period, called a tax year. For trusts, your tax year must generally be a calendar year, unless you are a charitable trust or are exempt from tax under the law. For partnerships, your tax year must conform with either the tax year of the majority partners, the tax year of the principal owners, or a calendar year, in that order, unless you establish a business purpose for using a different tax year. A personal service corporation must use a calendar year as its tax year, unless you establish a business purpose for using a different tax year. For further information, see Publication 538 (Accounting Periods and Methods), available at most IRS offices.

We've enclosed a Form SS-4, Application for Employer Identification Number (EIN), for you to complete so your account record will be complete. Please return the form with the bottom part of this notice within 15 days. We've enclosed an envelope for your convenience.

If you already have an EIN, return the bottom part of this notice to us. Write in the exact name and EIN shown on the notice you received assigning you that EIN.

Thank you for your cooperation.

(IRS USE ONLY)

576A

09-11-2003 TOYT B 0423959513 2553

Attachment

#P08000034573

54 061498

Keep this part for your records.

CP 576 A (Rev. 7-1997)

Return this part with your Form SS-4, Application
for Employer Identification Number. Please correct
any errors in your name or address.

CP 576 A

0423959513

Your Telephone Number Best Time to Call
()

DATE OF THIS NOTICE: 09-11-2003
EMPLOYER IDENTIFICATION NUMBER: 90-0107023
FORM: 2553 NOBOD

INTERNAL REVENUE SERVICE
OGDEN UT 84201-0023
|||

TOYTEC PERFORMANCE
12141 SW 114TH PL
MIAMI FL 33176



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
HOLTSVILLE NY 00501-0023

Atchman

#10300034573

DATE OF THIS NOTICE: 08-14-2003
NUMBER OF THIS NOTICE: CP 575 A
EMPLOYER IDENTIFICATION NUMBER: 16-1679267
FORM: SS-4 NOBOD 0000002846
0133657085 B

5406149K

FOR ASSISTANCE CALL US AT:
1-800-829-0115

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

TOYTECH PERFORMANCE INC
12141 SW 114TH PL
MIAMI FL 33176

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 16-1679267. This EIN will identify your business account, tax returns, and documents even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation of your name or EIN, it may cause a delay in processing and may result in incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following form(s) by the date we show.

Form 941
Form 1120
Form 940

10/31/2003
03/15/2004
01/31/2004

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a determination of your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Revenue Procedure 98-01, 1998-1 I.R.B.7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the form(s) or the due date(s) shown, you can call us at 1-800-829-0115 or write to us at the address shown above.

(IRS USE ONLY)

575A

08-14-2003 TOYT B 0133657085 SS-4

Handwritten: Attachments
Handwritten: #P03000034/573

If you are required to make deposits for employment taxes (Form 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks. If you need to make a deposit before you receive your supply, call us at 1-800-829-3676.

Start your business off right - pay your taxes the easy way. Pay through the Electronic Federal Tax Payment System (EFTPS). For information, call 1-800-829-3676 and request Publication 966, EFTPS Answers to the Most Commonly Asked Questions.

Please use the label IRS provided when filing tax documents. Use FTD coupons when making FTD payments. If that isn't possible, use your EIN and complete name and address as shown below to identify your account and to avoid delays in processing.

TOYTECH PERFORMANCE INC
12141 SW 114TH PL
MIAMI FL 33176

If this information isn't correct, please correct it using the bottom part of this notice. Return it to the address shown so we can correct your account.

Note: If you change your corporation to an S corporation, you must file Form 2553, Election by a Small Business Corporation.

Note: If you change your business to a corporation, you may need to file Form 8832, Entity Classification Election. See forms for instructions to determine if you are required to file.

(IRS USE ONLY)

575A

Attachment

08-14-2003 TOYT B 0133657085 SS-4

24061458

103000034 573

Keep this part for your records.

CP 575 A (Rev. 1-2001)

Return this part with any correspondence
so we may identify your account. Please
correct any errors in your name or address.

CP 575 A

0133657085

Your Telephone Number Best Time to Call
()

DATE OF THIS NOTICE: 08-14-2003
EMPLOYER IDENTIFICATION NUMBER: 16-1679267
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
HOLTSVILLE NY 00501-0023
|||

TOYTECH PERFORMANCE INC
12141 SW 114TH PL
MIAMI FL 33176