

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000132788

Entity Name: ANIMATED TOYS INC.

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

479 BILTMORE WAY  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

479 BILTMORE WAY  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 20-1661883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SALUM, ANTONIO  
10530 SW 51 ST  
MIAMI, FL 33165 US

**Name and Address of New Registered Agent:**

SALUM, ANTONIO  
479 BILTMORE WAY  
CORAL GABLES, FL 33134 US

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: ANTONIO SALUM

04/29/2009

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SALUM, ANTONIO  
Address: 10530 SW 51 ST  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: RA (X) Change ( ) Addition  
Name: SALUM, ANTONIO  
Address: 479 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANTONIO SALUM

RA

04/29/2009

Electronic Signature of Signing Officer or Director

Date