## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000018020

Entity Name: TOTIS TOYS, INC.

FILED Dec 09, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2121 PONCE DE LEON STE 1050 2121 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

SUITE1050

CORAL GABLES, FL 33134

**Current Mailing Address: New Mailing Address:** 

2121 PONCE DE LEON STE 1050 2121 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

SUITE1050

CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 20-2286985 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC. CONSULTING SERVICES OF SOUTH FLORIDA, INC. 2121 PONCE DE LEON STE 1050 2121 PONCE DE LEON BLVD.

CORAL GABLES, FL 33134 SUITE

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 GARCIA 12/09/2009

> 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: ( ) Delete Title: CEOD (X) Change ( ) Addition

CUCALON, MARJORIE Name: Name: CUCALON, MARJORIE 1627 BRICKELL AVE # 605 1627 BRICKELL AVE # 605 Address: Address:

City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33129

( ) Delete Title: Title: (X) Change ( ) Addition BALTRAX INTERNATIONAL LIMITED BALTRAX INTERNATIONAL LIMITED Name: Name: 701 BRICKELL KEY BLVD . #1905 Address: 1111 BRICKELL AVE. STE. 1113 Address:

MIAMI, FL 33131 MIAMI, FL 33131 City-St-Zip: City-St-Zip:

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: MARJORIE CUCALON **CEOD** 12/09/2009

Electronic Signature of Signing Officer or Director

Date