

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000103967

Entity Name: LA CHIQUITA TOYS INC.

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

5496 W. PONKAN ROAD  
PH  
APOPKA FLORIDA, 32712

## **New Principal Place of Business:**

5496 W. PONKAN ROAD  
PH  
APOPKA, FL 32712

## **Current Mailing Address:**

P.O. BOX 197  
INTERCESSION CITY, FL 33848

## **New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BONILLA, DOMINGA  
3561 HIDEAWAY ROAD  
PH  
APOPKA, FL 32712 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: BONILLA, DOMINGA  
Address: P.O. BOX 197  
City-St-Zip: INTERCESSION CITY, FL 33848 US

I hereby 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 all other like empowered.

SIGNATURE: DOMINGA BONILLA

P

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date