FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000	0014093 (7)		
CAROL'S BIRD TOYS, INC.	•	•		
Principal Place of Business	Mailing Address		18673064 110 18140 11111 80111 86111	00114 00101 11011 01017 BONE 10100 1111 1001
11934 LIZARD LANE UMATILLA FL 32784	POST OFFICE BOX 89 LEESBURG FL 34789	5273		
			3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		02/17/1993 4. FE! Number	07/26/1995 Applied For
21	26		59-3319380	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		6. Election Campaign Financing	Fee Required
23	28		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Country	Zip	Count y	8. This corporation has liability for in	
24 25 9. Name and Address of Current	29 Registered Agent	[30]	Florida Statutes Yes 10. Name and Address of New Ro	No Rolstered Agent
g. Individual Address of Outlete	negistered Agent	B1 Name	1	
ALBERTI, FRANK		20 0 11	loger G. Harkn	- e. 5 5
11934 LIZARD LANE		5treet Addre	82 Street Address (P.O. Box Number is Not Acceptable)	
UMATILLA FL 32784		83		
		84 City	•	B5 Zip Code
		0	emadilla,	FL 32784
 Pursuant to the provisions of Sections 607,0502 a or registered agent, or both, in the State of Florida 	ind 607.1508. Florida Statute L Such change was authorize	s, the above-named corporad by the co-normal home.	ation submits this statement for the purport of directors. Thereby accept the appo	nose of changing its registered office
familiar with, and accept the obligations of, Section	n 607.0505, Floridi, Statutes.	•		
SIGNATURE ROGET G. Harkness,		Klause S. E. Fagistereo Açent sejest ne tequese	•	74-96
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	DAYE (G)
TITLE D	DELETE	1 1 T.TL	resident Director	Change Addition
NAME HIRSCH, CAROL		12 NAM 🙀	loyer G. Harkra	35
STREET ADDRESS 11934 LIZARD LANE		1.3 STRE T ADDRESS	1934 Ligard have	×
CITY-ST-ZIP UMATILLA FL 32784		14 CITY ST-ZIP	Limentella, FL 37	는 구용식
TITLE	DELETE	2 1 TIJL		Change Addition
NAME		2.2 NAM		
STREET ADDRESS		2 3 STRE 1 ADDRESS		
CITY-ST-ZIP TITLE	DELETE	2.4 C(TY ST - Z(P)		C Channel C Market
NAME	☐ octric	3 1 1/11		Change Addition
STREET ADDRESS		3 2 NAM		
CITY-ST-ZIP		3.3 STREET ADDRESS 3.4 CITY SE-ZIP		
TITLE	☐ DELETE	4 1 TITL		Change Addition
NAME .	-	4.2 NAM		
STREET ADDRESS		4.3 STRE IT ADDRESS		
CITY-SI-ZIP		4.4 CITY ST ZIP		
HILE	☐ DELETE	5 1101		Change Addition
NAME		5.2 NAM		
STREET ADDRESS		53 STRE 1 ADDRESS		
CITY-S1-ZIP		5.4 CHTY ST-ZIP		
TITLE	☐ DELE!E	6 1 1111		Change 🔲 Addition
NAME				
		6 2 NAM		
STREET ADDRESS CITY-ST-ZIP		6.2 NAM 6.3 STRE T ADDRESS 6.4 CHY ST-ZIP		

14. I do hereby certify that the information supplied with this fung is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Togeth Country Florida

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Directors

Country Florida

**C

352-669-6424