FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000014093 (7)

CAROL'S BIRD TOYS, INC.

Principal Place of Business

Mailing Address

11834 LIZARD LANE

POST OFFICE BOX 895273

FILED May 12 1997 8:00am Secretary of State



UMATILLA FL 3	2784	LEESBURG FL 34789-5273									
						3. Date Incorporated 02/17/1993	or Qualified	3a. Date 04/29		Report	
	ace of Business	2a. Mailing Address		~		4. FEI Number			IA	oplied For	
	15 Bird Toys, Inc.	26				59-3319380			No	ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Statu	s Desired			Additional	
	od ws. Hwy. Hai	27				- Commond of Chara			Fee Re	equired	
City & State	_	City & State			i	6. Election Campaign Financing \$5.00 May Be					
201 .450.66.42		Zip Country				Trust Fund Contrib		Ц		to Fees	
Zip Country 24 32778 25 U.S. A.		├ ─¬ '		, Into C		8. This corporation ha				. 199.032,	
24 76-	9. Name and Address of Curren		30]		ــــــــــــــــــــــــــــــــــــــ	Florida Statutes		Yes			
	4 LIZARD LANE		Ĺ	Kora	185 (3. Harkne	55				
	TILLA FL 32784	82 Street Add			Address	dress (P.O. Box Number is Not Acceptable)					
	TE GETOT		83				7.71				
										j	
			- [1	84 City	ivar	Λ ೬		FL	85 Zip	Code	
11. Pursuent I	to the provisions of Sections 607 050:	2 and 607 1508. Florida Statute	s the ab	ove-named	cornora	tion submits this state	ment for the nu		1 -	(
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0§05, Florida Statutes.											
agent. I ar	m tamillar with, and accept the obliga	ations of, Section 607.0605, Flor	ioa Statu	nes.						ľ	
SIGNATURE .	TOGEL G. Harking Signature, Typed or printed name of repistered agen	ot and title if applicable (NOTE:	Registered	Agent signature	e required w	hen reinstating)	4-7	DATE			
12.	OFFICERS AND		13.	2		ADDITIONS/CHANG	ES TO OFFICI		IRECTOR	RS IN 12	
TITLE	D	☐ DELETE	1.1101	.F	Pre	udont, ou	€ر او مح	<u> </u>	Change	Addition	
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STREET ADDRESS			6.3 S1R	EFT ADDRESS							
CITY-ST-ZIP				7-ST-2IP	1						
	by certify that the information supplied										
information indicated on this ennual 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.											