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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

POSODODOSSTO (1)

1. Corporatio	JTIVE TOYS, INC.	0023370 (1)			
Principal Plac	e of Business	Mailing Address		- E LANDIANDEL DEN JOHN AUSTE ANDERE NATUR O	DLIA DOLLO ALODA DLIADA DLIAL INDIAL PORT (SADL
45 8 WICKHAM RD 45 8 WICKHAM RD MELBOURNE FL 32904 US US				DO NOT WRITE	E IN THIS SPACE
		00		3. Date Incorporated or Qualified	
				04/01/1993	Ì
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 26			59-3181427	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27				5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	
24	25	29 36	0	Personal Property Tax due June	
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CHENG, FRANK 81 Name/146				END FRANK	i
1099 EARLY DRIVE, N.W.				esa (P.O. Box Number is Not Acceptate	ole)
PALM BAY FL 32907				Caseywood Dr.	
			[⁸³] . 0	\mathcal{J}	
			84 City A O	hourno	FL 85 Zip Code
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 egistered					
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 607.0505, Florida Statutes.					
SIGNATURE					
	Signature Typed or profed name of registered as		Registered Agent signature require		DATE DIDECTORS IN 10
12.	D OFFICERS AF	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME		_			
STREET ADDRESS	1000 FARLY DRIVE N W	1140 Carenwood D	1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BAY FL 32907 A	allhourse E 2.9	1.4 City-St-ZIP		
TITLE	D	1140 Careywood D 12160urns Fi 329 5140 Careywood D	2.1 TITLE		Change Addition
NAME	CHENG, EDWARD	440 Careywood D	2.2 NAME		-
STREET ADDRESS	1099 EARLY DRIVE, N.W.	440 careywood u	2 3 STREET ADDRESS	•	
CITY-ST-ZIP	PALM BAY PL 32907 NO	elhaurne FL 32734	2. 4 CITY-ST-ZIP		1
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		ì
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		L Change L Addition
NAME	,		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		רו הניננינ .	5.1 TITLE		CT change TT workfull
NAME CIDICI ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	•	
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME		<u> </u>	62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		,

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attact furth an address.

6.4 City - St - ZIP