

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

5-1-95 5-5-101
CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 AM 10:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000055614 (0)

1. Corporation Name
TOY TRUCKS, INC.

Principal Place of Business
P O BOX 282
ZEPHYRHILLS FL 33539

Mailing Address
P O BOX 282
ZEPHYRHILLS FL 33539

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/04/1993		3a. Date of Last Report 05/01/1994	
21 Suite, Apt. #, etc.		2b Suite, Apt. #, etc.		4. FEI Number 59-3193643		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country		29 Country		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
FURMAN, DEBRA K 3718 ALLEN RD ZEPHYRHILLS FL 33541				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				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 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 607.0505, Florida Statutes.

SIGNATURE

Debra K. Furman

(NOTE: Registered Agent signature required when reappointing)

APRIL 10, 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	FURMAN, TOY T	1.2 NAME	
STREET ADDRESS	38820 8TH AVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	ZEPHYRHILLS FL 33540	1.4 CITY - ST - ZIP	
TITLE	DVST	2.1 TITLE	☐ Change ☐ Addition
NAME	FURMAN, DEBRA K	2.2 NAME	
STREET ADDRESS	3718 ALLEN RD	2.3 STREET ADDRESS	
CITY - ST - ZIP	ZEPHYRHILLS FL 33541	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 907, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with no address.

SIGNATURE:

Debra K. Furman
Debra K. Furman

APRIL

10, 1995

(813) 788-5174