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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000055614 (0)

TOY TRUCKS, INC.

' <b>.</b>		
Principal Place of Business	Mailing Address	
P O BOX 292 ZEPHYRHILLS FL \$3539	P O BOX 292 ZEPHYRHILLS FL 33539	
Principal Place of Rusiness	3. Mailing Address	

## **FILED** Apr 23 1998 8:00am Secretary of State

Princip	pal Piace c	of Business		М	ailing Address	3			a todasada tid tarda tilis odiri ddiri ddiri dara dara dara disk diska dirak birak dirak anda tada
P O BOX 292 P O BOX 292 ZEPHYRHILLS FL 33539 ZEPHYRHILLS FL 33539				L 33539			DO NOT WRITE IN THIS SPACE		
ľ									3. Date Incorporated or Qualified
a Pri	ncinal Plac	e of Busine		20	. Mailing Add				08/04/1993 4. FEI Number Applied For
21	Погрантис	O OI DUSING	33	26	, maining roo				59-3193643 Not Applicable
	ite, Apt. #,	etc.			Suite, Apt. #	, etc.			\$8.75 Additional
22			. ,				5. Certificate of Status Desired Fee Required		
City & State City & State						6. Election Campaign Financing \$5.00 May Be			
23				28					Trust Fund Contribution Added to Fees
Zip		Country Zip C		Country	6. This corporation offes of this paid the correct year intangible				
24			5	[29]		30	<u> </u>		Personal Property Tax due June 30. Yes No
		<del></del>	and Address of Cu	irrent Hegis	nered Ageni		81	Name	10. Name and Address of New Registered Agent
		IAN, DEBF					Ľ	INATIO	
		ALLEN RE					82	Street Ac	Address (P.O. Box Number is Not Acceptable)
	ZEPH	YPHILLS F	·£ 33541				83		
							84	City	FL 85 Zip Code
11. P	ursuant to	the provisio	ns of Sections 607	.0502 and 6	07.1508, Flori	da Statutes,	the abov	e-named co	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 agent. Familiar with, and accept the obligations of Section 607.0505, Florida Statutes.								oration's board of directors. I hereby accept the appointment as registered	
ł	ATURE A	)ı bra	4/ //	an,	Deb	rω K.		MAN	1 Vice thesedent (poril 16,1998
	Blo	mature, typed o	printed name of registere			(NOTE: R		ent signature re	required when reinstating) DATE
12.		DP	OFFICERS	AND DIREC		ELETE	<b>13.</b>		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME		FURMAN,	TOV T		ب ب		1.2 NAME		Change E Madridi
		38620 8T					1.3 STREET	ADDRESS	
Cffy-\$1			ILLS FL 33540				1.4 CITY - S		
TITLE		DVST			□ p	ELETE	2.1 TITLE	,,	Change Addition
NAME	I		DEBRA K				2.2 NAME		
STREET	ADDRESS	3718 ALL	en RD				2.3 STREET	ADDRESS	
CITY-SI	T- 21P	<b>ZEPHYRH</b>	ILLS FL 33541				2. 4 CITY-	ST · ZIP	
TITLE		_			D:	ELETE	3.1 TITLE		Change Addition
NAME							3.2 NAME		
	ADDRESS						3.3 STREET	ADDRESS	
CITY-SI	T-ZIP				Пр	ti tat	3.4. CITY-	ST-ZIP	Change Addition
TITLE					L_1 U	CLEFE	4.1 TITLE		☐ Change ☐ Addition
NAME	Antonree						4. 2 NAME	ADDRESS	
CITY-ST	ADDRESS						4.3 STREET 4.4 City - S		
TITLE	I-ZIF				□ Di	ELETE	5.1 TITLE	or · zir	☐ Change ☐ Addition
NAME							5.2 NAME		_ · · · · _ · · · ·
	ADDRESS						5.3 STREET	ADDRESS	
CITY-ST							5.4 CITY-S		
TITLE				<del></del>	□ D	ELETE	6.1 TITLE		Change Addition
NAME							6.2 NAME		
STREET	address						6.3 STREET	ADDRESS	
CIY-SI	r-ZIP						6.4 CITY - 9	ST - ZIP	

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 stated 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 or 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 State 1 and 1 and 2 or Block 13 if changed, or on an attachment with an address.