

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 4:18

DOCUMENT # P93000083085 (9)

1. Corporation Name
DOLLY'S FUN TOYS, INC.

Principal Place of Business: 960 OLD KINGS ROAD HOLLY HILL FL 32117
Mailing Address: 960 OLD KINGS ROAD HOLLY HILL FL 32117

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. County	29. County

3. Date of Corporation's Creation	3a. Date of Last Report
11/29/1993	09/28/1994
4. FIC Number	Applied For (Not Applicable)
59-3213119	
5. Certificate of State Taxed	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. Does corporation pay liability for intangible tax under S. 199.032, Florida Statutes? <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HEBERT, MARGARET F
960 OLD KINGS ROAD,
HOLLY HILLS FL 32117**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.04(2) and 607.15(8), 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 operation of, Section 607.04(2), Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

1011	D	HEBERT, MARGARET 960 OLD KINGS ROAD HOLLY HILL, FL 32117
1012		
1013		
1014		
1015		
1016		
1017		
1018		
1019		
1020		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11	NAME	Change	Addition
12	NAME		
13	NAME		
14	NAME		
15	NAME		
16	NAME		
17	NAME		
18	NAME		
19	NAME		
20	NAME		
21	NAME		
22	NAME		
23	NAME		
24	NAME		
25	NAME		
26	NAME		
27	NAME		
28	NAME		
29	NAME		
30	NAME		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and true, and qualify for the exemption stated in sections 119.07(9)(b), Florida Statutes. I further certify that the information included in this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made in the presence of a notary public or other officer of the corporation or the recorder or recorder empowered to receive this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1, of Block 11, attached, or on an attached block or blocks.

SIGNATURE: *Margaret F Hebert*
SIGNATURE AND TYPE IN PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

01/30/95 904.253-9720
DATE TIME