

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000025854 (8)

1. Corporation Name
KASHMIER TOYS CORP.

Principal Place of Business

C/O AMIR MOGHADDAMI
POST OFFICE BOX 281
ORLANDO FL 32802
US

Mailing Address

C/O AMIR MOGHADDAMI
POST OFFICE BOX 281
ORLANDO FL 32802
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 7807 Turkey Oak Lane	26 1527 E Concord ST	03/30/1994
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-3234769
City & State	City & State	Applied For
23 Kissimmee, FL	28 ORLANDO, FL	Not Applicable
Zip	Zip	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24 34747	29 32803	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
Country	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25 USA	30 USA	

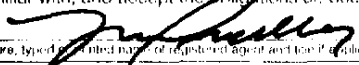
9. Name and Address of Current Registered Agent

MOGHADDAMI, AMIR
7710 WATER OAK COURT
SUITE 1500
KISSIMMEE FL 34747

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
ORLANDO	32803

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  WAYNE SMAILLEY 3-2-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	BHASKAR, PATEL M	1.2 NAME	199 Aldersley
STREET ADDRESS	P.O. BOX 281	1.3 STREET ADDRESS	7807 Turkey Oak Ln
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Kissimmee, FL 34747
TITLE	PD	2.1 TITLE	
NAME	MOGHADDAMI, AMIR	2.2 NAME	
STREET ADDRESS	P.O. BOX 281 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 attachment with an address.

CR2E034 (10/97)