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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 14 1997 8:00am

Secretary of State

- A HODARADA BIR 19910 BIRIN ODAR GERLI WEDIN ORDER FRANK ERIK ERIK HADI ABUR ARER

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000046520 (8)

WEST TOY COMPANY OF ASIA, INC.

Principal Place of Business 2699 STIRLING RD. SUITE 2068 FORT LAUDERDALE FL 33312 2. Principal Place of Business 21 Suite, Apt. #, etc. 22				Mailing Address 2699 STIRLING RD. SUITE 2068 FORT LAUDERDALE FL 33312-6596 28. Mailing Address 26 Suite, Apt. #, etc.				3. Date Incorporated or Qualified O5/28/1996 4. FEI Number 65-0689327 5. Certificate of Status Desired Sa. Date of Last Report Applied For Not Applicable Sa.75 Additional Fee Required	ble	
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
				Zip Country			, .	This corporation has liability for intangible tax under s. 199.032,	-	
24	25			30				Florida Statutes Yes No	_	
		stered Agent				10. Name and Address of New Registered Agent				
	IAIN, RONALE					aı	Name		- {	
2699 STIRLING RD. SUITE 2068				:			Street Add	Address (P.O. Box Number is Not Acceptable)		
	IT LAUDERDA	LE FL 33312				83			ㅓ	
						84	City	85 Zip Code		
						-	1 '	FL [™] '		
SIGNATURE		printed name of registered	agent and tit	le il applicable. (NC	TE: Registe	гөд Аре		orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered surred when reinstaling) DATE DATE	-	
12.	PDT	OFFICERS A	AND DIRE	:CTORS DELETE	13.	TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
THUE NAME	SHARP, ED	WARD		Fred Detric		NAME	1	Shanka Assume	ا "	
STREET ADDRESS	2699 STIRL						ADDRESS		1	
CITY+ST-ZiP	FORT LAUD	ERDALE FL 333	12			CITY - S				
TITLE	SD	7111		DELETE		TITLE		☐ Change ☐ Addition	on	
NAME	SCHAIN, R				2.2	NAME			ļ	
STREET ADDRESS	2699 STIRL		40				ADDRESS		-	
City - S1 - ZiP THLE	PUNI LAUL	DERDALE FL 333	12	☐ DELÉTE		CITY-	ST-ZIP	☐ Change ☐ Addition	ion	
NAME				DECENT		NAME		E Provin		
STREET ADDRESS					1		T ADDRESS	•		
CHTY - ST - ZIP					34.	спу-	ST-ZIP]	
THLE	7			☐ DELETE	41	TITLE		☐ Change ☐ Addition	on	
NAME					10	NAME	ì		ļ	
STREET ADORESS					•		TADDRESS	•		
CITY - SY - ZIP	·			☐ DELETE		CITY-S	ST-ZIP	Change Addition	ion	
NAME				family bearing		NAME		Armed Crowing Company a November		
STREET ADDRESS					1		T ADORESS		١	
CITY-S1-7IP						CITY-S				
1114			······	DELETE	6.1	TITLE		Change Addition	ion	
NAME					6.2	NAME		•		
STREET ADDRESS					6.3	STREET	T ADDRESS			

14. I do 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 of 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 gorizontion of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name