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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000069419 (5)

TOY-TEK AUTO INC.

Principal Place of Business

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address

CITY - S1 - 7IP

1770 NW 38 AVE. 1770 NW 38 AVE. LAUDERHILL FL 33311-4117 LAUDERHILL FL 33311 3. Date Incorporated or Qualified 3a. Date of Last Report 08/16/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 595 -86-7739 Not Applicable 21 26 Suite, Apt. #, etc \$8.75 Additional Suite, Apl. #, etc. 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WILLIAMS, ERROL L 1770 NW 38 AVE. Street Address (P.O. Box Number is Not Acceptable) 82 LAUDERHILL'FL 33311 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or project name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13, 12. DELETE Change 1.1 TITLE THLE 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-21P CITY - ST - ZIP Addition Change DELETE 2.1 TITLE TITLE nela Will 22 NAME NAME Co-Owner 2.3 STREET ADDRESS STREET ADDRESS 1770 NW 38 AVR 2.4 CITY-ST-ZIP CiTY - ST - ZIF CHARLENIL 12 33311 Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CHTY-ST-ZIF Change Addition DELETÉ 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7:P Change ___ Addition DELETE 51 TITLE TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-2IP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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