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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 06 1998 8:00am Secretary of State

DOCUMENT # P97000040568 (2) TOY DEPOT, INC.							
Principal Plac	e of Business	Mailing Address		_,	- - 130013001 110 10141 10011 00114 00114 00114	I MBILIS DIBNI BRIBI BRISA DI	
5700 OKEECH	D.						
WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33			33417		DO NOT WRITE I	N THIS SPACE	
					3. Date Incorporated or Qualified	·	
					05/07/1997		
	lace of Business	2a. Mailing Address			4. FEI Number 65-0755951	 +	oplied For ot Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #,			- 			<u>¢9.75</u>	Additional
22		27			5. Certificate of Status Desired		equired
City & Stat	6	City & State			6. Election Campaign Financing	\$5.00	May Be
23	Country	28	(<u> </u>		Trust Fund Contribution		to Fees
Zip 24	Country	Zip 29	Country 30		8. This corporation owes or has paid Personal Property Tax due June 3		angible No
24]	g, Name and Address of Current		[30]		10. Name and Address of New Reg		110
SC	OTT, TIMOTHY		81 Nam	e			
5700 OKEECHOBEE BLVD.			82 Stree	et Addre	ss (P.O. Box Number is Not Acceptable	2)	
WEST PALM BEACH FL 33417					os (i .o. Box ito ilisoi is ito isospiasi	-,	
			83				
			84 City			85 Zip	Code
44 Purguant	to the provisions of Sections 607 0502	and 607 1508 Florida Statut	as the above same	nd corpo	ration submits this statement for the nu	FL 65 Z.Ip	to registered
office or I	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligati	Florida, Such change was a ons of Section 607 0505. Florida	authorized by the control Statutes	prporation	in's board of directors. I hereby accept	the appointment as	registered
SIGNATURE			ontia Operator,				
12.	Signature, typod or printed name of registered agent OFFICERS AND		E: Registered Agent signal	ure required	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	S IN 12
TITLE	PD OFFICERS AND	DELETE	1.1 TITLE				AUDITION !
NAME	SCOTT, TIMOTHY	_	1.2 NAME	50	ott, finda L]
STREET ADDRESS	1863 ABBEY ROAD		1.3 STREET ADDRES	s 18	ott, Linda L 863 Abbey Rd est Palm Beach FL	22116	
CITY-ST-ZIP	WEST PALM BEACH FL 33415		1.4 CITY-ST-ZIP	W	est Itim Beach FL	35413	
TITLE		☐ DELETE	2.1 TITLE	Ì		Cnange	Addition (
NAME			2.2 NAME	-			}
STREET ADDRESS			2.3 STREET ADDRES	\$			
CITY-ST-ZIP TITLE		DELETE	2 4 CHY-ST-ZIP 3.1 TITLE	 -		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS	\$			1
CITY-ST-ZIP			3.4. CITY - ST- ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4 2 NAME	Ì			
STREET ADDRESS			4.3 STREET ADDRES	S			1
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition
NAME		CJ DECER	5.2 NAME	1		onange	1.00011011
STREET ADDRESS			5.3 STREET ADDRESS	s l			
CITY-ST-ZIP			5.4 CITY+S1-7IP				ł
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME	Ì			1
STREET ADDRESS			6.3 STREET ADDRESS	3			
CITY-ST-ZIP	ertify that the information supplied with	this filing does not exist. fo	6.4 CITY-ST-ZIP	tod in C	notion 110 07/3\/i) Elasida Ctatulas 1.6	irthor portify that 15 a	information
indicated	ertify that the information supplied with on this annual report or supplemental a	uns ming does not qualify fo innual report is true an d acc	л тте exemption sta surate and that my s	icu in S ianature	อยแอก 1 เร.ย/(ฮ)(ก), คอกตล Statutes. Hi - shall have the same legal effect as if r	iriner certify that the nade under oath: tha	miormation at Lam ari

indicated on this annual report or supplemental armual report is frue and accurate and that my signature shall have the same legal effect as it made under oath; that I am a 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.

SIGNATURE:

4-1-98