

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90084 007 ***150.00

DOCUMENT # P98000065481

1. Entity Name

SUPER TOYS, INC.

Principal Place of Business

**1380 SW 160TH AVENUE
SUNRISE FL 33326**

Mailing Address

**1380 SW 160TH AVENUE
SUNRISE FL 33326****B0055144**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1392 SW 160 AVENUE

Suite, Apt. #, etc.

3. Mailing Address

1392 SW 160 AVENUE

Suite, Apt. #, etc.

City & State

SUNRISE FL

City & State

SUNRISE FL

4. FEI Number

65-0854429

Applied For

Not Applicable

Zip

33326

Country

USA

Zip

33326

Country

USA5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GOLDBERG, MARK H
10000 STIRLING ROAD
SUITE 1
COOPER CITY FL 33024**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
PD	SILBERMAN, ARTHUR	609 VERONA PL	WESTON FL 33326	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
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				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Arthur Silberman, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/01**305-436-9992**

CR2E034 (10/00)