Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90069 016 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000066497

1. Corporation Name

CENTUR	ION TOYS AND COLLECTE	oles, inc.					
Principal Place of Business Mailing Address						11 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E E B
12273 SW 18TH TERRACE 12273 SW 18TH TERRACE							
MIAMI FL 33175-7365 MIAMI FL 33175-7365					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	13 SPACE	
					07/27/1998		-
2 Principal P	lace of Business	2a. Mailing Address			4 FEI Number	Ap	plied For
21	idda o'i Basirioos	26				<u> </u>	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					O No o Contra Designal III	\$8.75 A	dditional
27					5. Certificate of Status Desired	Fee Re	quired
City & State	6 .	City & State	City & State		6, Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution Added to Fees			
Zip	Country Zip Co		Country	•	8. This corporation owes the current year	Intangible	North I
24	25 29 30		30	Personal Property Tax.			≥ No
Name and Address of Current Registered Agent			81	Name	10. Name and Address of New Register	a Agent	
IOV/	A IODGE		81	Name	•		
JOYA, JORGE 12273 SW 18TH TERRACE			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33175-7365			-		- London - L		
MIAMI FL 33173-7303			83		•		
			84	City		85 Zip C	Code
		2 4 CO7 4E09 Florido Statutos	the char	named sorr	poration submits this statement for the purpose		registered
office or r agent. I a	egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was aut	inorizea by	the corporati	on's board of directors. I hereby accept the ap	pointment as reg	gistered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: F	Registered Age	nt signature require	ed when reinstating) DATE		
12.	OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS		
TITLE	P DELETE 1.1 T		1.1 TITLE			Change	☐ Addition
NAME	JOYA, JORGE 12N		1.2 NAME	1			
STREET ADDRESS			1.3 STREE	TADDRESS			
CITY-ST-ZIP	MIAMI FL 33175-7365 140		1.4 CITY-S	T-ZIP			
TITLE	V □ DELETE 2.1 TI		2.1 TITLE			Change Change	☐ Addition
NAME	JOYA, ANA		2.2 NAME	•			
STREET ADDRESS	12273 SW 18TH TERRACE 2.3 S		2.3 STREE	T ADDRESS	,		
CITY-ST-ZIP			2.4 CITY-5	ST-ZIP			
TITLE	DELETE 3.1 T		3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS	3.3 \$		3.3 STREE	TADDRESS	•		1
CITY-ST-ZIP		<u> </u>	3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS	·		ŀ
CITY-ST-ZIP			4.4 CITY-5	T-ZIP			□ A A Met
TITLE			5.1 TITLE			Change	Addition
NAME			5.2 NAME		÷		
STREET ADDRESS				TADORESS			
CITY_ST_7IP			5.4 CITY- S	T-ZIP			

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, with all other like amoraised.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

305-227-6728

Addition

Change