2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000070421

Entity Name: THE NEW AUTO TOY STORE, INC.

FILED Apr 29, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1624 E. SUNRISE BLVD. FT. LAUDERDALE, FL 33304

Current Mailing Address: New Mailing Address:

1624 E. SUNRISE BLVD. FT. LAUDERDALE, FL 33304

FEI Number: 52-2182729 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELGIDELY, BARRY

1624 E. SUNRISE BLVD.

FT. LAUDERDALE, FL 33304

ELGIDELY, ROBERT F
1624 E. SUNRISE BLVD.

FT. LAUDERDALE, FL 33304

FT. LAUDERDALE, FL 33304

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: ROBERT F. ELGIDELY 04/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: ANTHONY, RAY G Name: ANTHONY, RAY G

Address: 2 ALLEGHANY COUNTY AIRPORT Address: 2 ALLEGHENY COUNTY AIRPORT
City-St-Zip: WEST MIFFLIN, PA 15122 City-St-Zip: WEST MIFFLIN, PA 15122

Title: S () Delete Title: () Change () Addition

 Name:
 KANIA, WILLIAM B
 Name:

 Address:
 71 N MOUNT VERNON AVENUE
 Address:

 City-St-Zip:
 UNIONTOWN, PA 15401
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 SMOKER, BARRY
 Name:
 SMOKER, BARRY

 Address:
 882 BOULDER DRIVE
 Address:
 1422 STOLTZ ROAD

 City-St-Zip:
 BETHEL PARK, PA 15102
 City-St-Zip:
 BETHEL PARK, PA 15102

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAY G. ANTHONY P 04/29/2004