


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000102738 1. Entity Name TOYMAX 2000, INC.	
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Principal Place of Business 180 ISLAND DRIVE KEY BISCAYNE, FL 33149	Mailing Address 180 ISLAND DRIVE KEY BISCAYNE, FL 33149
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04112008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0979670	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MARTINEZ, FRANCISCO 555 NE 15TH STREET SUITE #934 MIAMI, FL 33132	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ CELEIRO, FRANCISCO 180 ISLAND DRIVE KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ0- MIYASHIKI, FRANCISCO M 180 ISLAND DR KEY BISCAYNE, FL 33149
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address) with all other: the empowered

SIGNATURE:



FRANCISCO MARTINEZ

4/16/08 (305) 571-5050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #