

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000195910

**Entity Name:** FENIX TOYS, LLC

**Current Principal Place of Business:**

6825 INTEGRA COVE BLVD  
APT 312  
ORLANDO, FL 32821

**Current Mailing Address:**

6825 INTEGRA COVE BLVD  
APT 312  
ORLANDO, FL 32821

**FEI Number:** 37-1908561

**Certificate of Status Desired:** No

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

HAFNER NETO, VICTOR AFFONSO  
6825 INTEGRA COVE BLVD  
APT 312  
ORLANDO, FL 32821 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            HAFNER NETO, VICTOR AFFONSO  
Address        6825 INTEGRA COVE BLVD APT 312  
City-State-Zip: ORLANDO FL 32821

Title            AMBR  
Name            ROSADO PRATES, MAISA  
Address        6825 INTEGRA COVE BLVD  
City-State-Zip: ORLANDO FL 32821

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAISA ROSADO PRATES

AMBR

04/16/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date