2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006333

Entity Name: POP TOONS INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1515 BROA NEW YORK	DWAY K, NY 10036				
Current Mailing Address:			New Mailing Address:		
C/O MICHAEL D. FRICKLAS 1515 BROADWAY NEW YORK, NY 10036					
FEI Number:	41-2044596	FEI Number Applied For () FEI Nur	nber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR					
Title: Name: Address: City-St-Zip: Title:	FRICKLAS, MICH 1515 BROADWA NEW YORK, NY	Υ	Title: Name: Address: City-St-Zip: Title:	() Change () Addition AS (X) Change () Addition	
Name: Address: City-St-Zip:	FUERST, JANE F 1515 BROADWA NEW YORK, NY	₹ Y	Name: Address: City-St-Zip:	FUERST, JANE R 1515 BROADWAY NEW YORK, NY 10036	
Title: Name: Address: City-St-Zip:	SVT () [NELSON, GEOR 1515 BROADWA NEW YORK, NY	Υ	Title: Name: Address: City-St-Zip:	SVPT (X) Change () Addition NELSON, GEORGE S TOBY 1515 BROADWAY NEW YORK, NY 10036	
Title: Name: Address: City-St-Zip:	DSEV () [DOOLEY, THOM 1515 BROADWA NEW YORK, NY	AS Y	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DOOLEY, THOMAS 1515 BROADWAY NEW YORK, NY 10036	
Title: Name: Address: City-St-Zip:	DEVP () [BARGE, JAMES 1515 BROADWA NEW YORK, NY	Υ	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BARGE, JAMES W 1515 BROADWAY NEW YORK, NY 10036	
Title: Name: Address: City-St-Zip:	P ()[KAY, KEVIN 1515 BROADWA NEW YORK, NY		Title: Name: Address: City-St-Zip:	()Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KEVIN KAY P 04/15/2009