

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90064 013 ***150.00

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1. Entity Name

MARVEL COMICS ENTERPRISES CORPORATION



Principal Place of Business

10 EAST 40TH ST.
NEW YORK NY 10016

Mailing Address

10 EAST 40TH ST.
NEW YORK NY 10016

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-3711775

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004. Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
HANDEL, MORTON E
10 EAST 40TH ST.
NEW YORK NY 10016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VC
PERLWUTTER, ISAAC
10 EAST 40TH ST.
NEW YORK NY 10016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ARAB, AVI
10 EAST 40TH ST.
NEW YORK NY 10016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/B ARAD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CUNEV, F. PETER
10 EAST 40TH ST.
NEW YORK NY 10016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/B CUNEO ☒ Change ☐ Addition
S/B Director

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
JAMES, WILLIAM
10 EAST 40TH ST.
NEW YORK NY 10016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPC
West, Kenneth P.
10 East York St.
New York, NY 10016 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
LIPSON, ALLEN
10 EAST 40TH ST.
NEW YORK NY 10016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/B President ☒ Change ☐ Addition

12. 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 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 like empowered.

SIGNATURE:

Kenneth P. West

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/04

Date

2125764000

Daytime Phone #