## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # F9	5000002566 (6)
MK-PPBC COMPANY, INC	) 
Principal Place of Business	Mailing Address



2171-1 KINGS MARIETTA G		2171-I KINGSTON C MARIETTA GA 3006		203 00000 000 00000	De Date of Lot Doord
				3. Date Incorporated or Qualified 05/26/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	•••	26		58-2111180	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			ree Required
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
23		28		B. This corporation has liability for	
Zip	Country	Zip	Gountry 30		s []No
24	g. Name and Address of Current	29 Agent		10. Name and Address of New F	
	g. Name and Address of Outrem	Tregistored rigorit	81 Name		
1/1 FIN 1	II DANDOLDU			ddress (P.O. Box Number is Not Acceptat	ola)
	H. RANDOLPH		82 Street A	ddress (F.O. Box Number is Not Accepted	ney
	/ 3RD AVE. FL 34475		83		
OUALA	FL 34475				85 Zip Code
			84 City		FL   S   Z   D O O O O O
or register	to the provisions of Sections 607.0502 red agent, or both, in the State of Floric th, and accept the obligations of, Secti	ia. Such change was aumo	MZ80 by the corporation a c	poration submits this statement for the puboard of directors. I hereby accept the app	rpose of changing its registered office pointment as registered agent. I am
SIGNATURE				the second of th	DATE
	Signature, typied or printed name of registered agent	<u> </u>	(NOTE Registered Agent's gnature rec 13.		HOERS AND DIRECTORS IN 12
12.	OFFICERS AND	DELETE	1.17111.6	Apprilons of process to on	Change Addition
TITLE	CT LONG MADILYN M		1.2 NAME		
NAME	LONG, MARILYN M 7475 WILDERCLIFF DR.		1.3 STREET ADDRESS		
STREET ADDRESS	ATLANTA GA 30328-1155		1.4 CITY - SI - ZIP		
CITY-ST-ZIP	C	DELFTE	2. 1 TUTLE		Change Addition
NAME	KRONER, KAREN D		2 2 NAME	Kramen	Spelling
STREET ADDRESS	4309 BELMONT PARK TERR.		23 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP	NASHVILLE TN 37215	•	24 CHY-\$1-ZIP	Kromer Kromer	·
TITLE	P	☐ DELETE	3 1 TITLE		Change Addition
NAME	KRONER, HENRY E		3 2 NAME	Kromer	spelling
STREET ADDRESS	4309 BELMONT PARK TERR.		3.3 STREET ADDRESS		
CITY - ST - ZIP	NASHVILLE TN 37215		3 4 CHTY - ST - ZIF		
TITLE	V	DELETE	4 1 1111.5		Change Addition
NAME	LONG, NOAH H JR.		4.2 NAME		
i e	LONG, NOATT IT OIL				
STREET ADDRESS	7475 WILDERCUFF DR.		4.3 STREET ADDRESS		
STREET ADDRESS City - ST - ZiP	_		4 4 CITY - ST - Z-P		Change Addition
	7475 WILDERCUFF DR.	☐ DELETE	4 4 GITY-ST-Z.P 5 % TITLE		Change Addition
City+S1-ZiP	7475 WILDERCUFF DR.	☐ DELETE	4 4 CITY-ST-Z-P 5 : TITLE 5 2 NAME		Change Add tion
CITY - ST - ZIP TITLE	7475 WILDERCUFF DR.	☐ DELETE	4 4 CITY - ST - Z.P 5 : TITLE 5 2 NAME 5 3 STREET ADDRESS		Change Add tion
CITY - ST - ZIP TITLE NAME	7475 WILDERCUFF DR.	_	4 4 CITY - ST - Z.P 5 : TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP		
City - St - Zip  TITLE  NAME  STREET ADDRESS	7475 WILDERCUFF DR.	☐ DELETE	4 4 CITY-ST-Z.P 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE		Change Addition
City - ST - ZiP TITLE NAME STREET ADDRESS CITY - ST - ZIP	7475 WILDERCUFF DR.	_	4 4 CITY-ST-Z.P 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE 6 2 NAME		
City-S1-ZiP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE	7475 WILDERCUFF DR.	_	4 4 CITY-ST-Z.P 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE		

I do hereby certify that the information supplied with this filing is voluntarily furnished and floes not quality for the exemption stated in Section 119.07(s)(k), Florida Statutes, following the information indicated on this annual report or supplemental annual reports 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 roceiver or truety-empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attack ment with an address.