


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90219 018 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000050684

1. Corporation Name  
TEKNO COMIX, INC.

Principal Place of Business 2255 GLADES RD. SUITE 237W BOCA RATON FL 33431	Mailing Address 2255 GLADES RD. SUITE 237W BOCA RATON FL 33431
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 07/20/1993		4. FEI Number 65-0497594		Applied For Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/>		\$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>	
7. This corporation owes the current year Intangible Personal Property Tax.		<input type="checkbox"/>		Yes		<input type="checkbox"/>		No	

9. Name and Address of Current Registered Agent CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST. TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent 81 Name Mitchell Rubenstein 82 Street Address (P.O. Box Number is Not Acceptable) 2255 Glades Road, Suite 237W 83 84 City Boca Raton FL 85 Zip Code 33431			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Mitchell Rubenstein / MITCHELL RUBENSTEIN 4-29-99  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VP	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BAILEY, ANDREW			1.2 NAME			
STREET ADDRESS	2255 GLADES ROAD, #237 WEST			1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-ST-ZIP			
TITLE	DST	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RUBENSTEIN, MITCHELL			2.2 NAME			
STREET ADDRESS	2255 GLADES ROAD #237W			2.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				3.2 NAME	DP		
STREET ADDRESS				3.3 STREET ADDRESS	Laurie S. Silvers		
CITY-ST-ZIP				3.4 CITY-ST-ZIP	2255 Glades Road #237W		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	Boca Raton, FL 33431		
NAME				4.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mitchell Rubenstein / MITCHELL RUBENSTEIN 4-29-99 561-998-1000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

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