

**FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S58412 (5)**

1. Corporation Name  
**P.P.F. COMICS, INC.**



Principal Place of Business: **6186 S CONGRESS AVE. S-A-4 LANTANA FL 33462**  
Mailing Address: **6186 S CONGRESS AVE. S-A-4 LANTANA FL 33462**

3. Date Incorporated or Qualified: **06/04/1991**  
3a. Date of Last Report: **02/24/1995**

2. Principal Place of Business: **21 1387 N. Military Trail**  
22. City & State: **West Palm Beach FL**  
23. Zip: **33409**  
24. Country: **Palm Bch**  
25. Mailing Address: **26 1387 N. Military Trail**  
27. City & State: **West Palm Beach FL**  
28. Zip: **33409**  
29. Country: **Palm Bch**  
30.

4. FEI Number: **65-0270282**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**GALLO, MARK  
6186 CONGRESS AVENUE  
A-4  
LANTANA FL 33462**

10. Name and Address of New Registered Agent  
81 Name: **MARK GALLO**  
82 Street Address (P.O. Box Number is Not Acceptable): **1387 N. Military Trail**  
83  
84 City: **WEST PALM BEACH FL** 85 Zip Code: **33409**

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: \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE: <b>P</b>	<input type="checkbox"/> DELETE
NAME: <b>GALLO, MARK</b>	
STREET ADDRESS: <b>9873 LAWRENCE RD #K204</b>	
CITY- ST- ZIP: <b>BOYNTON BCH FL</b>	
TITLE:	<input type="checkbox"/> DELETE
NAME:	
STREET ADDRESS:	
CITY- ST- ZIP:	
TITLE:	<input type="checkbox"/> DELETE
NAME:	
STREET ADDRESS:	
CITY- ST- ZIP:	
TITLE:	<input type="checkbox"/> DELETE
NAME:	
STREET ADDRESS:	
CITY- ST- ZIP:	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: <b>President</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME: <b>mark gallo</b>	
1.3 STREET ADDRESS: <b>484 S. Country Club Drive</b>	
1.4 CITY- ST- ZIP: <b>Atlantis, FL 33462-1240</b>	
2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME:	
2.3 STREET ADDRESS:	
2.4 CITY- ST- ZIP:	
3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME:	
3.3 STREET ADDRESS:	
3.4 CITY- ST- ZIP:	
4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME:	
4.3 STREET ADDRESS:	
4.4 CITY- ST- ZIP:	
5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME:	
5.3 STREET ADDRESS:	
5.4 CITY- ST- ZIP:	
6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME:	
6.3 STREET ADDRESS:	
6.4 CITY- ST- ZIP:	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: **MARK GALLO** 2-20-96 407 697 2554  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)