

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

**APPROVED
AND
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95 MAY -1 AM 9:20

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 520529 (1)
 1. Corporation Name
THE ZUCKERMAN GROUP INC

Principal Place of Business Mailing Address
6650 NW 41ST STREET **6650 NW 41ST STREET**
CORAL SPRINGS FL 33067 **CORAL SPRINGS FL 33067**
US **US**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	12/24/1990	05/01/1994
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	65-0232328	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28	<input type="checkbox"/>	
7a. Country	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	<input type="checkbox"/>	
Country	Zip	7. This corporation has liability for intangible tax under § 199(3)?	Florida Statutes
29	30	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SENTNER, KEVIN A. 17071 W. DIXIE HIGHWAY NORTH MIAMI BEACH FL 33160		B1 Name	
		B2 Street Address (P.O. Box Number is Not Acceptable)	
		B3	
		B4 City	FL B5 Zip Code

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 _____ DATE _____
SIGNATURE OF REGISTERED AGENT REQUIRED FOR FILING

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZUCKERMAN, ANDREW	1.2 NAME	
STREET ADDRESS	6650 NW 41ST STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	1.4 CITY-ST-ZIP	300001484483
TITLE	D	2.1 TITLE	05/11/95 - 01086 - 008
NAME	ZUCKERMAN, DAVID	2.2 NAME	***200.00 ***200.00
STREET ADDRESS	6650 NW 41ST STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZUCKERMAN, STUART	3.2 NAME	
STREET ADDRESS	6650 NW 41ST STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZUCKERMAN, STEVEN	4.2 NAME	
STREET ADDRESS	6650 NW 41ST STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 33067	4.4 CITY-ST-ZIP	
TITLE		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		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 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: _____ Pres. 5-1-95 305-772-4770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR