


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2005 08:00 AM
Secretary of State

DOCUMENT # S20529
 1. Entity Name
THE ZUCKERMAN GROUP, INC.



Principal Place of Business: **3111 UNIVERSITY DRIVE SUITE 610 CORAL SPRINGS FL 33065 US**
 Mailing Address: **3111 UNIVERSITY DRIVE SUITE 610 CORAL SPRINGS FL 33065 US**

2. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country
 3. Mailing Address: Suite, Apt. #, etc. City & State Zip Country



1st MOORE CR2E034 (10/04)

6. Name and Address of Current Registered Agent
HODKIN, PETER M
1 EAST BROWARD BLVD.
STE. 1501
FT. LAUDERDALE FL 33301

4. FEI Number: **65-0232328**
 Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent
 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	
TITLE: D <input type="checkbox"/> Delete	NAME: ZUCKERMAN, ANDREW STREET ADDRESS: 3111 UNIVERSITY DRIVE, STE 610 CITY - ST - ZIP: CORAL SPRINGS FL 33065
TITLE: D <input type="checkbox"/> Delete	NAME: ZUCKERMAN, DAVID STREET ADDRESS: 3111 UNIVERSITY DRIVE, STE 610 CITY - ST - ZIP: CORAL SPRINGS FL 33065
TITLE: D <input type="checkbox"/> Delete	NAME: ZUCKERMAN, STEVEN STREET ADDRESS: 3111 UNIVERSITY DRIVE, STE 610 CITY - ST - ZIP: CORAL SPRINGS FL 33065
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: _____

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY - ST - ZIP: _____
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY - ST - ZIP: _____
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY - ST - ZIP: _____
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY - ST - ZIP: _____
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY - ST - ZIP: _____

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: Andrew Zuckerman 2/23/05
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #