

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057062

Entity Name: ZD KAPLAN INC.

FILED
Apr 02, 2006
Secretary of State

Current Principal Place of Business:

305 MALCOM AVE
SPRING HILL, FL 34606

New Principal Place of Business:

521 PAINTED LEAF DR
BROOKSVILLE, FL 34604

Current Mailing Address:

305 MALCOM AVE
SPRING HILL, FL 34606

New Mailing Address:

521 PAINTED LEAF DR
BROOKSVILLE, FL 34604

FEI Number: 20-0947348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, ZACHARY
305 MALCOM AVE
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

KAPLAN, ZACHARY
521 PAINTED LEAF DR
BROOKSVILLE, FL 34604 US

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.

SIGNATURE:

04/02/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: KAPLAN, ZACHARY
Address: 305 MALCOM AVE
City-St-Zip: SPRING HILL, FL 34606

Title: S,D () Delete
Name: KAPLAN, DEBORAH
Address: 305 MALCOM AVE
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: KAPLAN, ZACHARY
Address: 521 PAINTED LEAF DR
City-St-Zip: BROOKSVILLE, FL 34604

Title: S,D (X) Change () Addition
Name: KAPLAN, DEBORAH
Address: 521 PAINTED LEAF DR
City-St-Zip: BROOKSVILLE, FL 34604

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH A. KAPLAN

S, D

04/02/2006

Electronic Signature of Signing Officer or Director

Date