
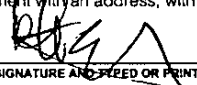


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2006 8:00 am
Secretary of State

08-08-2006 90001 004 ***150.00

DOCUMENT # 852525 1. Entity Name ZAR CORP.					
Principal Place of Business 350 BEDFORD STREET STE 307 STAMFORD, CT 06901 US			Mailing Address C/O OMNI PARTNERSHIP SERVICES, INC 747 3RD AVE - 31ST PL. NEW YORK, NY 10022 US		
2. Principal Place of Business 340 Pemberwick Road		3. Mailing Address Suite, Apt. #, etc. 1st Floor - C/o Greyhawk Capital			
City & State Greenwich, CT		City & State NEW YORK, NY		4. FEI Number 13-3065239	
Zip 06831		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301				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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS CHAZANOFF, JAY 41 BENEDICT ROAD STATEN ISLAND, NY		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPA DAVIS, DANIEL 747 3RD AVE - 10TH FL NEW YORK, NY 10017		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPA ZISES JAY 767 3RD AVE - 16TH FL NEW YORK, NY 10017		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPA ZISES, SELIG 988 FIFTH AVENUE NEW YORK, NY 10021		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPAS GOLDBERG, ARTHUR 25 TIDEWAY GREAT NECK, NY 11024		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT ADER RICHARD 1370 AVE OF THE AMERICAS NY, NY		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			Jay Chazanoff - VPS		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 8/2/06 Daytime Phone #		

Omni Partnership Services, Inc.
747 Third Avenue – 31st Floor
New York, NY 10022
Tel: 212-350-9900 Fax: 212-350-9911

ATTACHMENT
50 0246 97

Date: August 2, 2006

Florida Department of State
Division of Corporations
PO Box 6198
Tallahassee, FL 32314

Re: Zar Corp. Fein 13-3065239
Document #852525
2006 Annual Report

Dear Sir/Madam:

Enclosed is Zar Corp. completed Annual Report form and a check in the amount of \$150.00 for payment of the Report fee.

Please be advised that we did not receive prior notice for this report.

At this time we ask for your cooperation in waiving the late charge of \$400.

If you should have any questions please contact me at your convenience.

We thank you in advance for your cooperation.
Sincerely,



Manuel Marañón
Omni Partnership Services, Inc
212) 350-9900 Ext. 212