

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005431

Entity Name: ZIMENT GROUP INC.

FILED  
Mar 20, 2009  
Secretary of State

**Current Principal Place of Business:**

125 PARK AVENUE  
4TH FLOOR  
NEW YORK, NY 10017

**New Principal Place of Business:**

**Current Mailing Address:**

125 PARK AVENUE  
4TH FLOOR  
NEW YORK, NY 10017

**New Mailing Address:**

FEI Number: 13-4172170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOTELL, ROBERT  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: DVPT ( ) Delete  
Name: NEUMAN, THOMAS O  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: S ( ) Delete  
Name: HOWE, MARY ELLEN  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: D ( ) Delete  
Name: SALAMA, ERIC  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: CEO ( ) Delete  
Name: ZIMENT, HOWARD  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: AS ( ) Delete  
Name: FAREWELL, KEVIN  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BOWTELL, ROBERT  
Address: 125 PARK AVENUE, 4TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS O. NEUMAN

DVPT

03/20/2009

Electronic Signature of Signing Officer or Director

Date