

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M28403

Entity Name: KAPLAN INTERESTS, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

1717 N. BAYSHORE DRIVE
THE GRAND - STE. 2000
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

1717 N. BAYSHORE DRIVE
THE GRAND - STE. 2000
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 59-2671455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TYRONE PRATT
1717 N. BAYSHORE DRIVE
THE GRAND-SUITE 2000
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

PRATT, TYRONE
1717 N. BAYSHORE DRIVE
THE GRAND-SUITE 2000
MIAMI, FL 33132 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: TYRONE PRATT

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KAPLAN MORTON
Address: 1717 N. BAYSHORE DR., SUITE 2000
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: KAPLAN IAN
Address: 1717 N. BAYSHORE DR., SUITE 2000
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: KAPLAN, LINDA
Address: 1717 N BAYSHORE DRIVE SUITE 2000
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: IAN M. KAPLAN

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date