2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NA

Mar 02, 2007 8:00 am DOCUMENT # P93000063027 **Secretary of State** 1. Entity Name 03-02-2007 90021 002 ***150.00 ZUCKERMAN BROTHERS, INC. Principal Place of Business Mailing Address 6131 LYONS ROAD 6131 LYONS ROAD SUITE 200 SUITE 200 COCONUT CREEK FL 33073 COCONUT CREEK FL 33073 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0463323 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HODKIN, PETER M 4901 NW 17 WAY Street Address (P.O. Box Number is Not Acceptable) SUITE 504 FORT LAUDERDALE FL 33309 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DILE TITLE Change Addition Delete ZUCKERMAN, ANDREW NAME NAME 3111 UNIVERSITY DRIVE, SUITE 610 6131 Lyons Road #200 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33065 CITY-ST-ZIP CITY-ST-ZIP Coconut Creek, Fl. 33073 Change THE ☐ Delete TETLE ☐ Addition ZUCKERMAN, DAVID NAME 3111 UNIVERSITY DRIVE, SUITE 610 STREET ADDRESS STREET ADDRESS 6131 Lyons Road, Suite 200 CORAL SPRINGS FL 33065 CHY-SI-7IP CHY+SI+ZIP Coconut Creek, Fl. 33073 THE ☐ Delete TITLE Change ■ Addition ZUCKERMAN, STEVEN NAMI MAMI 3111 UNIVERSITY DRIVE, SUITE 610 STREET ADDRESS STREET ADDRESS 6131 Lyons Road#200 CORAL SPRINGS FL 33065 CITY-ST-ZIP CITY-ST-ZIP Coconut Creek, F1. 33073 THRE Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delele TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.

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