

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90064 025 ***150.00

DOCUMENT # F05000004841
 1. Entity Name
 EDUCATION CONNECTION SERVICES, INC.



Principal Place of Business: 6301 KAPLAN UNIVERSITY AVENUE, FT. LAUDERDALE, FL 33309
 Mailing Address: 888 SEVENTH AVENUE 23RD FL, NEW YORK, NY 10106

40007377



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc. *The Same as the above*
 3. Mailing Address
 Suite, Apt. #, etc. *The Same as the above*

01152008 Chg-P CR2E034 (12/06)

City & State: City & State
 Zip: Zip Country: Country

4. FEI Number: 20-3275988
 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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: _____
 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
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CEO ROSEN, ANDREW S 6301 KAPLAN UNIVERSITY AVENUE FT. LAUDERDALE, FL 33309 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P CAPEZZALI, RICHARD 6301 KAPLAN UNIVERSITY AVENUE FT. LAUDERDALE, FL 33309 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP BLUMENTHAL, RONALD 6301 KAPLAN UNIVERSITY AVENUE FT. LAUDERDALE, FL 33309 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP ZIPPER, TODD 6301 KAPLAN UNIVERSITY AVENUE FT. LAUDERDALE, FL 33309 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPT LANE, ROBERT 888 SEVENTH AVENUE NEW YORK, NY 10106 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPRE ELIE, JEFFREY L 888 SEVENTH AVENUE NEW YORK, NY 10106 <input type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition <i>See attached.</i> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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: *[Signature]* Robert L Lane Sr. VP Treasurer (212) 492-5841
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

46007377

F0500000 4841

Education Connection Services, Inc.

20-3275988

| Name | | Title | | Business Address |
|---------------------|--|------------------------------|--|---|
| Andrew S. Rosen | | Chief Executive Officer | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |
| Richard Capezzali | | President | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |
| Ronald Blumenthal | | Vice President | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |
| Todd Zipper | | Vice President | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |
| Rober L. Lane | | Vice President & Treasurer | | 888 7th Ave. New York, NY 10106 |
| Jeffrey L. Elie | | Vice President - Real Estate | | 888 7th Ave. New York, NY 10106 |
| Harold O. Levy | | Vice President & Secretary | | 888 7th Ave. New York, NY 10106 |
| Lisa Gefen Sicilian | | Assistant Secretary | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |

| Name | | Title | | Business Address |
|-------------------|--|----------|--|---|
| Andrew S. Rosen | | Director | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |
| Richard Capezzali | | Director | | 6301 Kaplan Univ. Dr. Ft. Lauderdale, FL 33309 |
| Horold O. Levy | | Director | | 888 7th Ave. New York, NY 10106 |