

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90128 026 ***150.00

DOCUMENT # P05000161301



1. Entity Name
S & Z FISCHER INVESTMENTS, INC.

401

Principal Place of Business Mailing Address
47 HAKABLON STREET **47 HAKABLON STREET**
JERUSALEM, X 0 IS **JERUSALEM, X 0 IS**



2. Principal Place of Business 3. Mailing Address
47 Rehov Hakablan **47 Rehov Hakablan**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

02252006 Chg-P CR2E034 (11/05)

City & State City & State
Jerusalem **Jerusalem**
 Zip Country Zip Country
93874 **Israel** **93874** **Israel**

4. FEI Number Applied For
20-4083545 Net Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 _____
Signature, hand or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	FISCHER, SAUL	
STREET ADDRESS	47 HAKABLON STREET	
CITY-ST-ZIP	JERUSALEM, X 0	
TITLE	P	<input type="checkbox"/> Delete
NAME	FISCHER, SAUL	
STREET ADDRESS	47 HAKABLON STREET	
CITY-ST-ZIP	JERUSALEM, X 0	
TITLE	T	<input type="checkbox"/> Delete
NAME	FISCHER, SAUL	
STREET ADDRESS	47 HAKABLON STREET	
CITY-ST-ZIP	JERUSALEM, X 0	
TITLE	S	<input type="checkbox"/> Delete
NAME	FISCHER, ZAHAVA	
STREET ADDRESS	47 HAKABLON STREET	
CITY-ST-ZIP	JERUSALEM, X 0	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	47 Rehov Hakablan	
STREET ADDRESS	Jerusalem 93874 Israel	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	47 Rehov Hakablan	
STREET ADDRESS	Jerusalem 93874 Israel	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	47 Rehov Hakablan	
STREET ADDRESS	Jerusalem 93874 Israel	
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Fischer, Saul	
STREET ADDRESS	47 Rehov Hakablan	
CITY-ST-ZIP	Jerusalem 93874 Israel	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 no other like empowered.

SIGNATURE: Saul Fischer SAUL Fischer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #