

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

2009 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

Retail sales of educational s			City Carson	State CA	Zip	
(310) 537-8600 6. Brief Description of the Character of Retail sales of educational s			1	107	90895	
Retail sales of educational s						
MIAMER AND ADDRESSE						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTAC President Name David Bo Kaplan			CHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS Wice President Name CEO Michael A. Kaplan			
Sirect Address 2695 East Dominguez Street			Street Address 2695 East Dominguez Street			
ா Carson	State CA	^{Zip} 90895	^{City} Carson	State CA	^{Zip} 90895	
Secretary Name: SECRETARY AND TREASURER Joshua Kaplan			Treasurer Name CFO Charles P. Kaplan			
Street Address 2695 East Dominguez Street			Street Address 2695 East Dominguez Street			
շար Carson	State CA	^{Zip} 90895	City Carson	State CA	^{Zip} 90895	
B. NAMES AND ADDRESSES Director Name David Bo Kaplan	OF THE DIRECTORS	: ("X" BOX FOR ATT	ACHMENT) FILL II Director Name Michael A. Kaplan	N SPACES BEFORE USING	ATTACHMENTS	
Street Address 2695 East Dominguez Street			Street Address 2695 East Dominguez Street			
ா Carson	State CA	Zip 90895	City Carson	State CA	<i>Ζι</i> φ 90895	
Director Name Joshua Kaplan	1.7	J	Director Name Charles P. Kaplan	4	(
Street Address 2695 East Dominguez Street			Street Address 2695 East Dominguez Street			
ଆନ Carson	State CA	<i>z</i> ір 90895	City Carson	State CA	^{Zip} 90895	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
This information is currently	of record in the Offic	ce of the Secretary of	Number of Shares	Class/Series	Par Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			750	Common/A	\$100.00 each	

File Date FILED
Check No FEB 1 7 2009
By 1345 43 FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, l declare and affirm that including any accompanying schedules and statement	-
contained herein are true and correct.	
Glenn Wadborrlok	2/13/09
Signature /	Date
GLENN NADBORALSKI	
Print or Type Name	*****
TAX SPECIALIST	
Title	· · · · · · · · · · · · · · · · · · ·
	Form 630 Rev. 08/08