

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000054

FILED  
Jul 10, 2006  
Secretary of State

Entity Name: MAHONEY COHEN & COMPANY, CPA, P.C.

**Current Principal Place of Business:**

1065 AVENUE OF THE AMERICAS  
NEW YORK, NY 10018

**New Principal Place of Business:**

**Current Mailing Address:**

1065 AVENUE OF THE AMERICAS  
NEW YORK, NY 10018

**New Mailing Address:**

FEI Number: 13-2806641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD., STE. 508  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: SCHAEFER, STEPHEN  
Address: 1065 AVENUE OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10018

Title: DC ( ) Delete  
Name: GARTEN, MARK  
Address: 1065 AVENUE OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10018

Title: DP (X) Delete  
Name: HERWITZ, GARY  
Address: 1065 AVENUE OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10018

Title: D (X) Delete  
Name: WEISSMAN, MARVIN  
Address: 1065 AVENUE OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10018

**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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN SCHAEFER

ST

07/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date