04/28/2006 13:44 5188864272 ENCOMPASS

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May 04, 2006 8:00 am
Secretary of State
05-04-2006 90213 028 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000075412

1. Entity Name
SARAH L. GARTNER, P.A.

40083547

Principal Place of Business	Mailing Address
146 EAST 57TH STREET NEW YORK, NY ~~10019~~ 10023	146 EAST 57TH STREET NEW YORK, NY 10019

04272006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
101 West 67th Street	101 West 67th Street
Suite, Apt. #, etc.: PH3BC	Suite, Apt. #, etc.: PH3BC
City & State: New York, NY	City & State: New York, NY
Zip: 100~~19-3301~~ 23 Country: USA	Zip: 100~~19-3301~~ 23 Country: USA

4. FEI Number: 65-1127681 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 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, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHWEITZER, SARAH L 146 EAST 57TH STREET NEW YORK, NY 10019	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gartner, Sarah L. 101 West 67th Street, PH3BC New York, NY 100~~19~~ 23	☒ Change ☐ Addition
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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: Sarah Gartner April 27, 2006 212-246-7914
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #