2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000087692

1. Entity Name

LUSTGARTEN COMMUNICATIONS, INC.



FILED Apr 06, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1850 HOMEWOOD BLVD 408 1850 HOMEWOOD BLVD

408

DELRAY BEACH, FL 33445

DELRAY BEACH, FL 33445



CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4.	FEI Number		Applied For
	94-3293861		Not Applicable
5.	Certificate of Status Desired	\$8.7 Fee R	Additional ulred

6. Name and Address of Current Registered Agent

LUSTGARTEN, KAREN 1850 HOMEWOOD BLVD 408 DELRAY BEACH, FL 33445

SIGNATURE: ∠

DO NOT WRITE IN THIS SPACE

No Chg-P

04042007

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 fill applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Finance				\$5,00 May Be					
	ay 1, 2007 Fee will be \$550.00	Trust Fund Contribution.		Added to Fees					
10.	OFFICERS AND DIREC	CTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUSTGARTEN, KAREN 1850 HOMEWOOD BLVD 408 DELRAY BEACH, FL				U00000692726				
TITLE NAME STREET ADDRESS CITY-ST-ZiP					04/16/07-80011-016 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filling 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.									