

## Client Information

|                  |                                             |
|------------------|---------------------------------------------|
| Client Name      | Benjamin Partners, Inc.                     |
| Business Address | 589 Broadway, 4th Floor, New York, NY 10012 |
| Client P.O. Name | Axel, Blair                                 |
| Business Phone   | (212) 334-8700                              |
| Business Email   | BLOCKED_EMAIL                               |

## Lobbyist Entities

### Lobbyist Entity # 1

|                                                    |                                      |
|----------------------------------------------------|--------------------------------------|
| Lobbyist Entity's Name                             | J. Adams Consulting                  |
| Lobbyist Entity's Business Phone                   | (212) 786-7565                       |
| Lobbyist Entity's Business Address                 | One Penn Plaza, 36th Floor, NY 10119 |
| Compensation Paid or Owed During the Calendar Year | \$7,000                              |

## Lobbying Activities

### Activity # 1

Subject Category VARIOUS ISSUES

Subject Details HELP RESOLVE ISSUE REGARDING INACCURATE BUILDING DEPT RECORDS FOR CLIENT OWNED PROPERTY. WORKED WITH THE OFFICE OF THE MAYOR AND CAU TO ADDRESS ILLEGAL VENDOR ISSUES ON CANAL STREET AND WORK WITH DEPT OF BUILDINGS TO RECTIFY A FINE ISSUED IN ERROR. WORKED WITH THE MAYOR'S OFFICE TO ADDRESS ILLEGAL VENDOR ISSUES ON CANAL STREET AND WORK WITH DEPT OF BUILDINGS TO RECTIFY A FINE ISSUED IN ERROR.

| Target                        | Office/Department | Contact Name     |
|-------------------------------|-------------------|------------------|
| Community Affairs Unit        |                   | PARVIZI, NAZLI   |
| Department of Buildings (DOB) |                   | UNKNOWN, UNKNOWN |

## Reimbursed Client Expenses (Expenses Reimbursed to the Lobbyist)

## 2009 Client Annual Report for Benjamin Partners, Inc.

|                                                         |        |
|---------------------------------------------------------|--------|
| Aggregate of all expenses for salaries of support staff | \$0.00 |
|---------------------------------------------------------|--------|

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|                                             |        |
|---------------------------------------------|--------|
| Total of Aggregate Expenses \$75.00 or less | \$0.00 |
|---------------------------------------------|--------|

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|                                          |    |
|------------------------------------------|----|
| Are there expenses greater than \$75.00? | No |
|------------------------------------------|----|

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### Itemized Expenses

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|                        |        |
|------------------------|--------|
| Itemized Expense Total | \$0.00 |
|------------------------|--------|

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|                                                          |            |
|----------------------------------------------------------|------------|
| Total Compensation Paid or Owed During the Calendar Year | \$7,000.00 |
|----------------------------------------------------------|------------|

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|                                          |            |
|------------------------------------------|------------|
| Total Expenses and Compensation for Year | \$7,000.00 |
|------------------------------------------|------------|

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## CERTIFICATION

I certify that all statements made on this report are true and correct to the best of my knowledge and belief, and I understand that the willful false statement of any material fact herein will subject me to the provisions of law relevant to the making of false instruments and will render such statement null and void.

|                         |                  |
|-------------------------|------------------|
| Principal Officer Name  | Axel, Blair      |
| Principal Officer Email | BLOCKED_EMAIL    |
| Certification Date      | 02/11/2010 10:31 |

## ELECTRONIC SIGNATURE

Blair Axel was required to indicate acceptance of the representations made in the following statement by entering his or her password used to access the E-Lobbyist, New York City Lobbyist Filing System and pressing the Submit button to affix his or her electronic signature and file the report with the Office of City Clerk - City of New York.

"I certify that all statements made on this report are true and correct to the best of my knowledge and belief, and I understand that the willful false statement of any material fact herein will subject me to the provisions of law relevant to the making of false instruments and will render such statement null and void."