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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 03-14-0
 2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name THE ROUZER COMPANY
 Address 1200 WESTVIEW LN, #305
 City RALEIGH State NC Zip 27605
 4. Principal place of business (if different from line 3)
 City _____ State/Zip (or Country) _____
 5. Telephone number and contact name
(919) 701-0037 Contact DAVID ROUZER E-mail (optional) _____
 6. General description of registrant's business or activities
SELF-EMPLOYED GOVERNMENT AFFAIRS CONSULT.

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.* Self

7. Client name SHERMAN'S 1400 BROADWAY NYC LTD.
 Address 500 FIFTH AVENUE
 City NEW YORK State NY Zip 10110
 8. Principal place of business (if different from line 7)
 City _____ State/Zip (or Country) _____
 9. General description of client's business or activities
MANUFACTURING / SALES / MARKETING

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>DAVID ROUZER</u>	

0000053385

Form LD-1 (Rev. 06/98)

Registrant Name THE ROUZER Co. Client Name SHERMAN'S 1400 BROADWAY

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

TOB

12. Specific lobbying issues (current and anticipated)

FDA REGULATION OF TOBACCO PRODUCTS

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No ⇒ Go to line 14.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or supervises the lobbying activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the lobbying activity?

No ⇒ Sign and date the registration.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature

D. Rouzer

Date

4-23-07

3000053386

Printed Name and Title DAVID ROUZER, PRESIDENT

Form LD-1 (Rev. 06/98)