

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 APR 11 PM 1:00



DOCUMENT # P95000020078
1. Entity Name
NEW CENTURY INVESTOR SERVICES, INC.

Principal Place of Business C/O 4182 LIVE OAK BLVD. DELRAY BEACH, FL 33445	Mailing Address C/O 600 CENTRAL AVE. SUITE 365 HIGHLAND PARK, IL 60035
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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04052005 Chg-P CR2E034 (10/03)

City & State	City & State
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4. FEI Number 65-0575689	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**FELNER, JAY
4182 LIVE OAK BOULEVARD
DELRAY BEACH, FL 33445**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete SCHWARTZBERG, ALBERT STREET ADDRESS 44 SOUTH BROADWAY, SUITE 614 CITY-ST-ZIP WHITE PLAINS, NY 10601
TITLE	VSD <input type="checkbox"/> Delete GOLDMAN, ROBERT U STREET ADDRESS 600 CENTRAL AVENUE, SUITE 365 CITY-ST-ZIP HIGHLAND PARK, IL 60035
TITLE	VTD <input type="checkbox"/> Delete WAGNER, NATHAN STREET ADDRESS 600 CENTRAL AVENUE, SUITE 365 CITY-ST-ZIP HIGHLAND PARK, IL 60035
TITLE	VD <input type="checkbox"/> Delete FELNER, JAY STREET ADDRESS 4182 LIVE OAK BLVD. CITY-ST-ZIP DELRAY BCH, FL 33445
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

700051349487

04/20/05--01008--027 **150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

By: **Nathan Wagner, Treasurer 4/5/2005 (847) 432-3666**

SIGNATURE: _____ Date _____ Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR