

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 12, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000012289**

1. Entity Name  
**THE 10193 CONSULTING GROUP, INC.**



Principal Place of Business  
**10193 GINGER POINT COURT  
BONITA SPRINGS, FL 34235**

Mailing Address  
**10193 GINGER POINT COURT  
BONITA SPRINGS, FL 34235**



01042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**27-0049706**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**EISER, FREDERICK A  
10193 GINGER POINT COURT  
BONITA SPRINGS, FL 34235**

**DO NOT WRITE  
IN THIS SPACE**

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 *FREDERICK A. EISNER* (**FREDERICK A. EISNER**) PRES. 1/4/07  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**000000585057  
01/12/07-80063-011 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	PT
NAME	EISNER, FREDERICK
STREET ADDRESS	10193 GINGER POINTE CT.
CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	VS
NAME	EISNER, KATHRYN G
STREET ADDRESS	10193 GINGER POINTE CT.
CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 *FREDERICK A. EISNER* (**FREDERICK A. EISNER**) PRES 1/4/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

**259-949-0260**