

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H82009

**Entity Name:** PERSONALLY YOURS SERVICES, INC.

**Current Principal Place of Business:**

411 N. NEW RIVER DRIVE E.  
UNIT 1406  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

411 N. NEW RIVER DRIVE E.  
UNIT 1406  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 59-2597845

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

*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.*

**SIGNATURE:** MICHAEL R. REISER

01/22/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name REISER, JACQUELINE BPD  
Address 411 N. NEW RIVER DRIVE E.  
UNIT 1406  
City-State-Zip: FORT LAUDERDALE FL 33301

Title VP  
Name REISER, MICHAEL R  
Address 411 N. NEW RIVER DRIVE E.  
UNIT 1406  
City-State-Zip: FORT LAUDERDALE FL 33301

Title VSD  
Name REISER, ELIZABETH M  
Address 540 COCONUT CIRCLE  
City-State-Zip: WESTON FL 33326

Title DV  
Name REISER, DONALD  
Address 540 COCONUT CIRCLE  
City-State-Zip: WESTON FL 33326

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL REISER

VP

01/22/2016

Electronic Signature of Signing Officer/Director Detail

Date