

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # 397045

1. Entity Name
ARGUS REALTY SERVICES, INC.



Principal Place of Business

**2300 GLADES RD
SUITE # 360W
BOCA RATON, FL 33431 US**

Mailing Address

**2300 GLADES RD
SUITE # 360W
BOCA RATON, FL 33431 US**

DO NOT WRITE IN THIS SPACE

01042008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1569838

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRUCE SCHREIBER
2300 GLADES RD STE 360 W
BOCA RATON, FL 33431**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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
NAME SCHREIBER, BRUCE
STREET ADDRESS 2300 GLADES RD STE 360 W
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE ST
NAME SCHREIBER, SYDNEY
STREET ADDRESS 2300 GLADES RD STE 360W
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE VP
NAME ROOKS, BEVERLY
STREET ADDRESS 2300 GLADES RD STE # 360W
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000905003
05/01/08-80036-008 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruce Schreiber
Bruce Schreiber

Date

Daytime Phone #

4/15/08
4/15/08

561-353-1900
561-353-1900