

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90281 049 ***150.00

DOCUMENT # P02000054959

1. Entity Name
REULER ENTERPRISES, INC.



Principal Place of Business
**12600 BURNING TREE LANE
POMPANO BEACH, FL 33071**

Mailing Address
**12600 BURNING TREE LANE
POMPANO BEACH, FL 33071**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03122006

Chg-P

CR2E034 (11/05)

4. FEI Number
04-3675700

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**REUTER, MICHAEL
12600 BURNING TREE LANE
POMPANO BEACH, FL 33071**

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

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **WECHSLER, ROBERT**
STREET ADDRESS **7885 SW 147 STREET**
CITY-ST-ZIP **MIAMI, FL 33158**

TITLE **D** ☒ Change ☐ Addition
NAME **SAME**
STREET ADDRESS **414 PINE VALLEY DRIVE**
CITY-ST-ZIP **BRIDGEVILLE, PA 15017**

TITLE **D** ☐ Delete
NAME **REUTER, MICHAEL**
STREET ADDRESS **12600 BURNING TREE LANE**
CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

TITLE **~~REUTER, MICHAEL~~** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Michael L. Reuter President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Michael L. Reuter

3/16/06
Date

954 776 3170
Daytime Phone #