

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000121153

1. Entity Name
THE REISER GROUP, INC.



Principal Place of Business
1785 SHOWER TREE WAY
WELLINGTON, FL 33414-583 US

Mailing Address
C/O MARIO G DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD, #1302
WELLINGTON, FL 33414 US

DO NOT WRITE IN THIS SPACE



02022006 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0225663 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

DE MENDOZA, MARIO G III PA
12765 FOREST HILLBLVD.
STE. 1302
WELLINGTON, FL 33414

**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 reappointing)

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

00000504230
04/26/06-80063-018 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME REISER, STEPHEN C
STREET ADDRESS 1785 SHOWER TREE WAY
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE VP
NAME REISER, LINDA R
STREET ADDRESS 1785 SHOWER TREE WAY
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE DS
NAME REISER, STEPHEN C
STREET ADDRESS 1785 SHOWER TREE WAY
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE DT
NAME REISER, LINDA R
STREET ADDRESS 1785 SHOWER TREE WAY
CITY-ST-ZIP WELLINGTON, FL 33414

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:

Stephen C. Reiser, Pres.

3/27/06 561-795-6795
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR