


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90003 021 ***150.00

DOCUMENT # PO5000087266	
1. Entity Name Susan P. Reiter, P.A.	

Principal Place of Business 631 Heritage Dr Weston FL 33326	Mailing Address 631 Heritage Dr Weston FL 33326
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DO NOT WRITE IN THIS SPACE

40101000



☒ No Chg-P CR2E034 (11/05)

4. FEI Number 25-1920375	Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent Spiegel & Utter PA 1840 SW 22nd St Unit Miami FL 33145
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Susan P. Reiter P.A. 631 Heritage Dr Weston FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert L. Reiter P.A. 631 Heritage Dr Weston FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SS Andrew D. Reiter 631 Heritage Dr Weston FL 33326
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: **Susan P. Reiter** **4/28/08** **954 389-7866**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #