

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000020078

1. Entity Name
NEW CENTURY INVESTOR SERVICES, INC.



Principal Place of Business
C/O 4182 LIVE OAK BLVD.
DELRAY BEACH, FL 33445

Mailing Address
C/O 600 CENTRAL AVE.
SUITE 365
HIGHLAND PARK, IL 60035

FILED

06 MAR 13 AM 8:27

RECEIVED
TALLAHASSEE, FLORIDA



02022006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0575689

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FELNER, JAY
4182 LIVE OAK BOULEVARD
DELRAY BEACH, FL 33445

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, 2006 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	SCHWARTZBERG, ALBERT
STREET ADDRESS	44 SOUTH BROADWAY, SUITE 614
CITY-ST-ZIP	WHITE PLAINS, NY 10601
TITLE	VSD
NAME	GOLDMAN, ROBERT U
STREET ADDRESS	600 CENTRAL AVENUE, SUITE 365
CITY-ST-ZIP	HIGHLAND PARK, IL 60035
TITLE	VTD
NAME	WAGNER, NATHAN
STREET ADDRESS	600 CENTRAL AVENUE, SUITE 365
CITY-ST-ZIP	HIGHLAND PARK, IL 60035
TITLE	VD
NAME	FELNER, JAY
STREET ADDRESS	4182 LIVE OAK BLVD.
CITY-ST-ZIP	DELRAY BCH, FL 33445
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

JS 3/16

DO NOT WRITE
IN THIS SPACE

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03/30/06--01048--003 **150.00

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 reports 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

Nathan Wagner, Treasurer 3/10/06 847-432-3666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #