

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 26, 2003 8:00 am**  
**Secretary of State**

07-28-2003 90144 012 \*\*\*150.00

**DOCUMENT # 490576**

1. Entity Name

**CAPITOL LIGHTING - BOCA RATON, INC.**

Principal Place of Business

**365 ROUTE 10  
EAST HANOVER NJ 07936**

Mailing Address

**365 ROUTE 10  
EAST HANOVER NJ 07936**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1642723**

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

**LEBERSFELD, KENNETH  
4441 WOODFIELD BLVD  
BOCA RATON FL 33434**

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 resigning)

DATE

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**Make Check Payable to Florida Department of State**

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 **PD** ☐ Delete  
NAME **LEBERSFELD, HERMAN**  
STREET ADDRESS **10 PRINCETON TERRACE**  
CITY-ST-ZIP **SHORTHILLS NJ 07078**

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

TITLE **VST** ☐ Delete  
NAME **LEBERSFELD, MAX**  
STREET ADDRESS **44 NORTH RD.**  
CITY-ST-ZIP **SHORTHILLS NJ 07078**

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

TITLE **D** ☐ Delete  
NAME **LEBERSFELD, MAX**  
STREET ADDRESS **44 NORTH RD.**  
CITY-ST-ZIP **SHORTHILLS NJ 07078**

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

TITLE **ASD** ☐ Delete  
NAME **LEBERSFELD, KENNETH**  
STREET ADDRESS **4441 WOODFIELD BLVD**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 exemption stated in Section 119.07(3)(i), 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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/23/03**

**973-887-8600**

Date

Daytime Phone #

CR2E034 (4/03)

Attachment #  
**Capitol**  
Prestige lighting and home furnishings world

55055037  
490576

July 23, 2003

Division of Corporations  
Uniform Business Report Filings  
P O Box 1500  
Tallahassee, FL 32302

Dear Sir/Madam:

~~Re: Capitol Lighting Boca Raton, Inc.,~~ enclosed is the  
2003 Uniform Business Report and check for \$150.

Please waive the late fee of \$400. as we did not receive the notice in time to pay on time.

Thank you.

Very truly yours,

*Max Febersfeld*

Max Febersfeld  
Vice-President/Director