

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F45438

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Entity Name:** LESLIE SCHWARTZ ASSOCIATES, INC.

**Current Principal Place of Business:**

76 IVY RD  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

2937 W CYPRESS CREEK RD  
101  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

76 IVY RD  
HOLLYWOOD, FL 33021

**New Mailing Address:**

2937 W CYPRESS CREEK RD  
101  
FORT LAUDERDALE, FL 33309

**FEI Number:** 59-2175370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHWARTZ, RICHARD  
76 IVY RD  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

SCHWARTZ, RICHARD  
2937 W CYPRESS CREEK RD  
101  
FORT LAUDERDALE, FL 33309 US

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.

**SIGNATURE:** RICHARD SCHWARTZ

02/01/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** SCHWARTZ, LESLIE  
**Address:** 4707 BANYAN LANE  
**City-St-Zip:** TAMARAC, FL

**Title:** VP  
**Name:** SCHWARTZ, RICHARD  
**Address:** 2937 W CYPRESS CREEK RD  
**City-St-Zip:** FORT LAUDERDALE, FL 33309

**Title:** VP  
**Name:** JACOBS, ARLENE  
**Address:** 62 HUMMINGBIRD DR  
**City-St-Zip:** ROSLYN, NY 11576

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** RICHARD SCHWARTZ

VP

02/01/2010

Electronic Signature of Signing Officer or Director

Date