## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

% RICHARD P. ZARETSKY

## DOCUMENT # **L34654**

1. Entity Name

F-L OF FT. PIERCE, INC.

Principal Place of Business

% RICHARD P. ZARETSKY



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90213 046 \*\*\*150.00

STE. 900			

1655 PALM BEACH LAKES BLVD STE. 900 W PALM BEACH FL 33401			1655 PALM BEACH LAKES BLVD STE. 900 W PALM BEACH FL 33401									
2. Principal Pla	ace of Business 3. Mailing Address						î laatilen asa suu suura aura aura suur	4101 D1011 BEA	el mimit ninse kei	()) <b>410</b> () <b>190</b> ()		
Suite, Apt. #	#, etc. Suite, Apt. #, etc.						CHECK HERE IF MAKING CHANGES					
City & State	e City & State						4. F	65-0180595			olied For Applicable	
Zip		Country	Zip Country				Certificate of Status Desired		88.75 Add ee Required			
<u> </u>	6. Name	and Address of Current F	egistere	d Agent			7. Name and Address of New Registered Agent					
						Name					1	
ZARETSKY, RICHARD P. 1655 PALM BEACH LAKES BLVD.					Street Address (P.O. Box Number is Not Acceptable)							
	I REACH L	WKE2 RLAD				<del></del>			<del></del>			
SUITE 900												
W. PALM BEACH FL 33401					City			FL	Zip Code	+		
8. The above the obligation	named entit ons of regist	y submits this statement for lered agent.	the purp	ose of changing its re	egistere	ed office or regis	stered ag	ent, or both, in the State of Flori	da. Lam f	amiliar with, a	and accept	
SIGNATURE -	Signature, typed	or printed name of registered agent a	nd title if app	licable. (NOTE:	Registere	d Agent signature requ	vired when re	einstating)	DATE			
After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State							Election Campaign Fina     Trust Fund Contribution	. [	Added	<b>0</b> May Be to Fees		
10.	OFFICERS AND DIRECTORS 11.				AL	DITIONS/CHANGES TO OFFIC	CERS AND	DIRECTORS				
NAME STREET ADDRESS	DP LEVIN, FA 99 POWEI ROSLYN I	NNY R HOUSE RD. HEIGHTS NY		☐ Delete						Change	Addition	
TITLE NAME STREET ADDRESS	S LEVIN, JA 99 POWE		•	☐ Delete						☐ Change	Addition	
STREET ADDRESS		PHILIP RHOUSE RD STE 102 HEIGHTS NY 11577		☐ Delete		ı				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		1				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	F		-	□ Delete						· 🔲 Change	☐ Addition	
TITLE NAME STREET AODRESS CITY-ST-ZIP				□ Delete .	CITY	EET ADDRESS '-ST-ZIP	a Socia-	119.07(3)(i), Florida Statutes. !	further ce	☐ Change	☐ Addition	

12. I hereby certify the the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Fluring certify that the limiting 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 attacoment with an address, with all other like empowered.

**SIGNATURE:** 

GRANTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/03

(516) 484-5900

Date Da

Daytime Phone #

CH2E034 (10/02)