

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90652 001 *****8.75
04-23-2003 90652 002 ***150.00

04-23-2003 90652 001 *****8.75
04-23-2003 90652 002 ***150.00

DOCUMENT # P01000074802

1. Entity Name

INDRIERI & LOPACIUK ARCHITECTURE AND INTERIORS,
INC.

LEE INDRIERI INTERIORS, INC.



Principal Place of Business

17276 BOCA CLUB BLVD. STE 1806
BOCA RATON FL 33487

Mailing Address

17276 BOCA CLUB BLVD. STE 1806
BOCA RATON FL 33487

2. Principal Place of Business

350 CAMINO GARDENS BLVD

3. Mailing Address

350 CAMINO GARDENS BLVD

Suite, Apt. #, etc.

SUITE 300

Suite, Apt. #, etc.

SUITE 300

City & State

BOCA RATON FL

City & State

BOCA RATON FL

Zip

33432

Country

PALM BEACH

Zip

33432

Country

PALM BEACH

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1123742

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOPACIUK, DAVID J

17276 BOCA CLUB BLVD, STE 1806

BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

LEANNE INDRIERI

Street Address (P.O. Box Number is Not Acceptable)

350 CAMINO GARDENS BLVD

SUITE 300

City

BOCA RATON

FL

Zip Code

33432

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

Leanne Indrieri president

Leanne Indrieri

4/18/03

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, 2003 Fee will be \$550.00

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

TITLE *DP* ☒ Delete
NAME *LOPACIUK, DAVID J*
STREET ADDRESS *17276 BOCA CLUB BLVD, STE 1806*
CITY-ST-ZIP *BOCA RATON FL 33487*

TITLE *DVTS* ☐ Delete
NAME *INDRIERI, LEANNE*
STREET ADDRESS *17276 BOCA CLUB BLVD, STE 1806*
CITY-ST-ZIP *BOCA RATON FL 33487*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *DP* ☒ Change ☐ Addition
NAME *LEANNE INDRIERI*
STREET ADDRESS *350 CAMINO GARDENS BLVD STE 300*
CITY-ST-ZIP *BOCA RATON, FL 33432*

TITLE *TS* ☐ Change ☒ Addition
NAME *BARBARA DEIMER*
STREET ADDRESS *350 CAMINO GARDENS BLVD STE 300*
CITY-ST-ZIP *BOCA RATON, FL 33432*

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

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

TITLE ☐ Change ☐ Addition
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:

Leanne Indrieri president

Leanne Indrieri 4/18/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)