

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000131734

FILED  
Feb 10, 2003  
Secretary of State

**Entity Name:** FORTRESS PROFESSIONAL SERVICES, INC.

**Current Principal Place of Business:**

10100 W SAMPLE ROAD STE 325  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

10100 W SAMPLE ROAD STE 325  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 65-0534056

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEFFLER, JOEL  
10100 W SAMPLE ROAD STE 325  
CORAL SPRINGS, FL 33065

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

HERNANDEZ, DAVID  
3000 NORTH UNIVERSITY DRIVE  
SUITE E  
CORAL SPRINGS, FL 33065

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:** DAVID HERNANDEZ

02/10/2003

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** LEFFLER, JOEL  
**Address:** 10100 W SAMPLE ROAD STE 325  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**Title:** D ( ) Delete  
**Name:** LEFFLER, LEONARD  
**Address:** 10100 W SAMPLE ROAD STE 325  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

**SIGNATURE:** LEONARD LEFFLER

VP

02/10/2003

Electronic Signature of Signing Officer or Director

Date