

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000036367

1. Entity Name  
FT. PIERCE ENTERPRISES, INC.



Principal Place of Business  
3224 SOUTH U.S. 1  
FT. PIERCE FL 34982  
US

Mailing Address  
~~2601 MCCOY ROAD~~  
~~ORLANDO FL 32809~~  
~~US~~

2. Principal Place of Business  
3224 SOUTH U.S. 1  
Suite, Apt. #, etc.

3. Mailing Address  
3224 SOUTH U.S. 1  
Suite, Apt. #, etc.  
FORT PIERCE

City & State  
FORT PIERCE, FL

City & State  
FL

Zip 34982 Country U.S.A.

Zip 34982 Country U.S.A.

4. FEI Number 65-0414309

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

PATEL, NATVERLAL K  
2601 MCCOY RD  
ORLANDO FL 32780

## 7. Name and Address of New Registered Agent

Name KOOZHAMPALA JOSEPH

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

3224 SOUTH U.S. 1

City FORT PIERCE

FL

Zip Code 34982

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 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 VP  
NAME PATEL, NATVERLAL K  
STREET ADDRESS 2601 MCCOY ROAD  
CITY-ST-ZIP ORLANDO FL ☒ Delete

TITLE P  
NAME PATEL, DILIP C  
STREET ADDRESS 201 S. 14TH STREET  
CITY-ST-ZIP LEESBURG FL 32809 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP  
NAME JOSEGOPURATHINGAL ☐ Change ☒ Addition  
STREET ADDRESS 18718 ST. HIGHWAY 28  
CITY-ST-ZIP DELHI, NY 13753

TITLE PRESIDENT  
NAME KOOZHAMPALA JOSEPH ☐ Change ☒ Addition  
STREET ADDRESS 3224 SOUTH U.S. 1, FORT PIERCE  
CITY-ST-ZIP FL 34982

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

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

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

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

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: Joseph Koozhampala PRESIDENT, Date 2/17/03 Daytime Phone # 772 465-7000

FILED

03 JUN 13 PM 2:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01-15-03 01008 017 \$55.00

03-24-03 01002 001 \$103.75



☒ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)