

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

pg 1 of 2

FILED

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT #

K81077

1. Entity Name

CAPE SPARKLE, INC

~~1002-9585-7~~

DO NOT WRITE IN THIS SPACE

100011789861
02/04/03--01080--001 **450.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

822 SW 54TH LANE

Suite, Apt. #, etc.

3. Mailing Address

822 SW 54TH LANE

Suite, Apt. #, etc.

City & State

CAPE CORAL, FL

Zip

33914

Country

City & State

CAPE CORAL, FL

Zip

33914

Country

4. FEI Number

592939 857

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

SANDRA MC GRAW

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

822 SW 54TH LANE

City

CAPE CORAL

FL

Zip Code

33914

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.

SIGNATURE

Sandra McGraw

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/21/03

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
SANDRA MCGRAW
822 SW 54 LANE
CAPE CORAL, FL 33914

TITLE
NAME
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CITY-ST-ZIP

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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sandra McGraw

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/03

Date

239-860-1593

Daytime Phone #

CR2E034B (12/01)



Charles Abels Massie, CPA*, PA

* Licensed in Florida

Certified Valuation Analyst
12065 Metro Parkway, Suite 101, Fort Myers, FL 33912
Phone (941) 768-2171 / Fax (941) 768-6074
www.cpamassie.com

December 11, 2002

Florida Department of State
Division of Corporations
Annual Reports Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Please accept the enclosed check in the amount of \$150.00 for the 2002 Annual Report of the enclosed company (Cape Sparkle, Inc.). The company never received the original reports, as their paid accountant (professional tax preparer) did not report a change of address to you, as they had requested he do.

Upon reviewing their information on the internet, I brought this to their attention. They promptly produced the enclosed check in order to rectify the problem. Thank you in advance for your consideration of this singular situation.

Sincerely,

Charles Abels Massie, CPA

Enclosures

CC: Cape Sparkle, Inc.