

2002 UNIFORM BUSINESS REPORT (UBR)

0108241 AV

DOCUMENT # P00000086332

1. Entity Name
SAPSAI SOCCER CAMP, INC.

FILED

02 OCT 15 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O NICK SAPSAI
126 NW DORCHESTER ST.
PT. ST. LUCIE FL 34983

Mailing Address
C/O NICK SAPSAI
126 NW DORCHESTER ST.
PT. ST. LUCIE FL 34983

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 65-1027851
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
SAPSAI, NICK
126 NW DORCHESTER ST
PT. ST. LUCIE FL 34983

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002-Fee will be \$750.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SAPSAI, NICK		NAME		
STREET ADDRESS	126 NW DORCHESTER ST		STREET ADDRESS		
CITY-ST-ZIP	PORT SAINT LUCIE FL 34983		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** 10/7/02 *Nick Sapsai*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

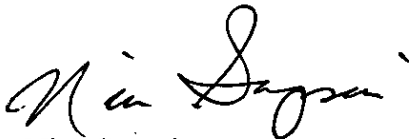
September 5, 2002

Sapsai Soccer Camp, Inc.
126 Dorchester Street
Port St. Lucie, Florida 34983-1633

This is to certify that this is the first notice that this corporation has received for the 2002 Uniform Business Report (UBR). Since the corporation did not receive the prior notice, we are requesting that the late fee be waived, and are enclosing the original \$150.00 filing fee.

Also be advised that we filed the 2002 Florida Intangible Personal Property Tax Return in June by phone, confirmation number 0206280941.

Sincerely,



Nick Sapsai
President
Sapsai Soccer Camp, Inc.

usage for my camp 2-3 mo in the
winter time. Presently working in
N.J.