

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

FILED

02 NOV -9 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000071576

1. Entity Name

NORQUIP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

9432 YULEE DRIVE

Suite, Apt., #, etc.

9432 YULEE DRIVE

Suite, Apt., #, etc.

City & State

HOMOSASSA, FL

HOMOSASSA, FL

Zip

34448

Country

USA

Zip

34448

Country

USA

2002 UBR

4. FEI Number
59-3734515

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

PETER J. NORTH

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

9432 YULEE DRIVE

City

HOMOSASSA

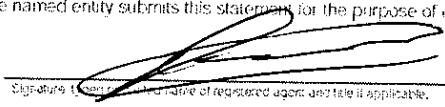
FL

Zip Code

34448

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



Signature of registered agent, and file if applicable.

(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)

☐

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	D PETER J. NORTH 9432 YULEE DRIVE HOMOSASSA, FL 34448	TITLE NAME STREET ADDRESS CITY- ST- ZIP	300008900923 11/12/02--01012--002 **\$50.00
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter J. North

352-628-4747

Date

Expiry Period

CR2E034B (12/01)

282

NORQUIP INC.
P.O. BOX 332, HOMOSASSA, FL. 34487
PH. (352) 628-4747 FAX (352) 628-9600
E-MAIL pnorth@tampabay.rr.com

OCTOBER 24, 2002

TO THE FLORIDA DEPARTMENT OF STATE,

WE, AS A BEGINNING BUSINESS, HAVE BEEN WONDERING WHAT HAPPENED TO CHECK NUMBER 1184, MADE OUT TO THE DIVISION OF CORPORATIONS IN JULY FOR \$150.00 (COPY ATTACHED). WE HAVE NOTICED THAT IT HAS NEVER APPEARED ON OUR BANK STATEMENTS. AS A COMPANY JUST STARTING OUT, WE HAD SOME DIFFICULTY WITH OUR BOOKKEEPING . WE STARTED WITH SOMEONE WHO DID NOT KNOW VERY MUCH ABOUT BOOKKEEPING AND NOW HAVE JUST RECENTLY FOUND SOMEONE WHO WILL BE KEEPING THAT SIDE OF THE BUSINESS TOGETHER. THE PRESIDENT OF OUR COMPANY HAD CALLED ON TUESDAY AND IT WAS SUGGESTED THAT WE SEND ANOTHER CHECK EXPLAINING THE ABOVE. THE NUMBER WE CALLED WAS (850) 245-6059.

PLEASE RESPOND TO US AS SOON AS POSSIBLE, AS YOU KNOW THE URGENCY OF THIS MATTER NEEDS TO BE RESOLVED. ENCLOSED IS A NEW CHECK AND A COPY OF OUR REGISTER AS PROOF OF OUR GOOD INTENTIONS.

YOU WILL ALSO NOTICE THAT THE CHECK WAS DUE IN MAY, BUT NOT SENT OUT UNTIL JULY, THAT IS FROM A MISTAKE OUR ORIGINAL BOOKKEEPER WHO DID NOT KNOW ABOUT IT, UNTIL JULY. AGAIN, WE APOLOGIZE IMMENSELY FOR ANY CONFUSION OR INCONVENIENCE WE HAVE CAUSED. PLEASE CONTACT US AT (352) 628-4747 AS SOON AS THIS LETTER IS RECEIVED TO LET US KNOW WE NEED TO DO NOTHING FURTHER IN THIS MATTER.

THANK YOU FOR YOUR PATIENCE AND UNDERSTANDING.

SINCERELY,



AMANDA BULLEY
(NORQUIP ACCOUNTANT)
PETER NORTH
(NORQUIP PRESIDENT)

DO NOT DETACH !
