2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P02000031960 DOCUMENT # 1. Entity Name

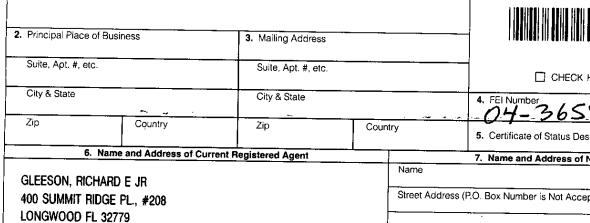
C.G. CAP, INC.

SIGNATURE



Mailing Address 400 SUMMIT RIDGE PL., #208

LONGWOOD FL 32779



FILED Feb 24, 2003 8:00 am Secretary of State

02-24-2003 90237 028 ***150.00



☐ CHECK HERE IF MAKING CHANGES

	20	1		Applied For
<u>8558</u>		<u>) </u>		Not Applicable
esired	′	\$8.7	75 .	Additional

Fee Required 7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

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

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

	OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME STREET ADDRESS CITY-ST-ZIP	D GLEESON, RICHARD E JR 400 SUMMIT RIDGE PL., #208 LONGWOOD FL 32779	Velete TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: