

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90112 041 ***150.00

DOCUMENT # P02000069248

1. Entity Name
NORTH CAPE ENTERPRISES, INC.



Principal Place of Business
2117 NW 42ND PLACE
CAPE CORAL FL 33993

Mailing Address
2117 NW 42ND PLACE
CAPE CORAL FL 33993

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3692725

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

WRIGHT, CHRISTINE F ESQ.
4427 S.E. 16TH PLACE, #2
CAPE CORAL FL 33904

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

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 DPST ☐ Delete
NAME SMEY, RENEE
STREET ADDRESS 2117 NW 42ND PLACE
CITY-ST-ZIP CAPE CORAL FL 33993

TITLE DV ☐ Delete
NAME GRANCHI, RONALD
STREET ADDRESS 123 SW 39TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33991

TITLE D ☐ Delete
NAME GRANCHI, MARSCHA
STREET ADDRESS 123 SW 39TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33991

TITLE D ☐ Delete
NAME SINGLEY, NORMAN
STREET ADDRESS 175 DODD ROAD
CITY-ST-ZIP WINDSOR NY 13865

TITLE D ☐ Delete
NAME SINGLEY, LOUISE
STREET ADDRESS 175 DODD ROAD
CITY-ST-ZIP WINDSOR NY 13865

TITLE D ☐ Delete
NAME PURDY, CAROL
STREET ADDRESS 3154 MEADOW ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33406

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition
NAME AMIL, JOHN
STREET ADDRESS 3154 MEADOW RD
CITY-ST-ZIP WEST PALM BEACH, FL 33406

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

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

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

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

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

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:

Renée SMEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/03
Date

239-810-1270
Daytime Phone #

CR2E034 (10/02)