

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000085086

1. Entity Name

CAPE HOLDINGS INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90058 006 ***150.00

Principal Place of Business

Mailing Address

25 SE SECOND AVENUE
 SUITE 1135
 MIAMI FL 33131
 US

25 SE SECOND AVENUE
 SUITE 1135
 MIAMI FL 33131-1605
 US

2. Principal Place of Business

P.O. Box 28134

3. Mailing Address

P.O. Box 28134

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 Panama City FL

City & State
 Panama City FL

4. FEI Number **59-3214754**

Applied For

Not Applicable

Zip
 32411-8134

Country
 USA

Zip
 32411-8134

Country
 USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHARP, SARAH HELENE
 25 SE SECOND AVENUE
 SUITE 1135
 MIAMI FL 33131

Name

Sarah Helene Sharp

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

25 Southeast Second Avenue

Suite 1020

City
 Miami

FL

Zip Code
 33131

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

Sarah Helene Sharp

April 28, 2000

Signature, typed or printed name of registered agent and title 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) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DPT
 SHARP, WILLIAM L
 401 N. MICHIGAN AVE. #1900
 CHICAGO IL 60611 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VS
 SHARP, SARAH HELENE
 25 SE SECOND AVENUE, SUITE 1135
 MIAMI FL 33131 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VS
 Sharp, Sarah Helene
 25 Southeast Second Avenue, Suite 1020
 Miami FL 33131 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VS
 SHARP, SHERYL
 400 SOUTH GREEN ST
 CHICAGO IL 60607 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VS
 Sharp, Sheryl
 401 N. Michigan Avenue
 Chicago IL 60611 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V
 SHARP, JONATHAN DOUGL
 1107 SIXTEENTH STREET
 SANTA MONICA CA 90403 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 2000

Date

(305)372-5900

Daytime Phone #

CR2E034 (9/99)