

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 02, 2003 8:00 am**  
**Secretary of State**

0145443 AB

**DOCUMENT # F01000004835**

1. Entity Name  
**P.O.P. DISPLAYS, INC.**



09-02-2003 90187 038 \*\*\*550.00

Principal Place of Business  
**26-45 BROOKLYN QUEENS EXPRESSWAY WEST  
WOODSIDE NY 11377**

Mailing Address  
**26-45 BROOKLYN QUEENS EXPRESSWAY WEST  
WOODSIDE NY 11377**



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 **11-2222630**

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

7. Name and Address of New Registered Agent

**NATIONAL CORPORATE RESEARCH, LTD., INC.  
103 N. MERIDIAN STREET  
TALLAHASSEE FL 32301-0000**

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 \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ECKER, WILLIAM 226 DUNDEE ROAD STANFORD CT	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ORLANDO, EDWARD 3 STONE HILL DRIVE MANHASSET NY	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Tolly, David 26-45 Brooklyn Queens Expressway W Woodside, NY 11377	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jacobson, Michael 30 Rows Wharf, Ste. 300 Boston, MA 02110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Reichert, Michel 30 Rows Wharf, Ste. 300 Boston, MA 02110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hermann, Peter Z. 30 Rows Wharf, Ste. 300 Boston, MA 02110	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Orlando, Edward 3 Stone Hill Drive Manhasset, NY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**DAVID H. TOLLY, STD - ERM/MSO 8/25/03**

Date

Daytime Phone #

CR2E034 (4/03)

ATTACHMENT  
# FO/000004835  
80142.710

CHOATE, HALL & STEWART

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

EXCHANGE PLACE

53 STATE STREET

BOSTON, MASSACHUSETTS 02109-2804

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WWW.CHOATE.COM

NICOLE WOLFE  
DIRECT DIAL: (617) 248-5128  
EMAIL: NWOLFE@CHOATE.COM

July 30, 2003

**VIA OVERNIGHT MAIL**

David Tolly  
Creative Solutions Group, Inc.  
26-45 Brooklyn Queens Expressway West  
Woodside, NY 11377

RE: Florida Department of State – 2003 Business Report  
P.O.P. Displays, Inc.

Dear David:

Enclosed please find a P.O.P. Displays, Inc. - 2003 Business Report for filing in Florida. This filing is due on September 10, 2003 in order to avoid a late penalty of \$200.00. Please sign and return the report together with the \$550.00 filing fee to me for filing.

Per my email yesterday, I am returning to you the unfiled Illinois annual report for Econo-Pak, Inc. According to Bob Szanyi, Econo-Pak no longer has operations in Illinois, and he does not want to continue to file annual reports.

Finally, I forwarded you copies of the Delaware Annual Reports for Form House Holdings, Inc. and CSG Holdings I, Inc. Have you had a chance to sign and return to me for filing?

If you have any questions or concerns, please do not hesitate to contact me. Thank you.

Sincerely,



Nicole Wolfe  
Corporate Paralegal

Enclosures

cc: Stephen Cohen  
(without enclosures)