FILED
Jun 11, 2002 8:00 am
Secretary of State
05-21-2002 91146 013 ***150.00

2002 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000061366

1. Entity Name
POP-A-CHERRY, INC.

DO NOT WRITE IN THIS SPACE

[redacted]

2. Principal Place of Business	3. Mailing Address
1225 DUVAL STREET	P. O. BOX 1117
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: KEY WEST, FL	City & State: KEY WEST, FL
Zip: 33040 / Country: USA	Zip: 33040 / Country: USA

DO NOT WRITE IN THIS SPACE
02-0586246

4. FEI Number: ~~0134549848~~ — Applied For / Not Applicable

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

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7. Name and Address of Current Registered Agent
Name: HUGH J. MORGAN, ESQ.
Street Address (P.O. Box Number is Not Acceptable): 317 WHITEHEAD STREET
City: KEY WEST FL Zip Code: 33040

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: Hugh J Morgan — Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: 5-1-02

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	DIRECTOR HUGH W. MORGAN 404 SOUTH STREET KEY WEST, FL 33040
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR HUGH J. MORGAN 404 SOUTH ST. KEY WEST, FL 33040
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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

SIGNATURE: Hugh J Morgan — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 5-1-02 — Daytime Phone: (305) 296-5676

CR2E034B (12/01)

Attachment 34760
P00000061346

Sorry for the mistake..
That was the wrong number.