

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 # **PO00000061366**

1. Entity Name

POP-A-CHERRY, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1225 DUVAL STREET

Suite, Apt. #, etc.

3. Mailing Address

P. O. BOX 1117

Suite, Apt. #, etc.

City & State
KEY WEST, FL

City & State
KEY WEST, FL

Zip
33040

Country
USA

Zip
33040

Country
USA

4. FEI Number

02-0586246
~~0134549848~~

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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

**DO NOT WRITE
IN THIS SPACE**

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

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

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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

Daytime Phone

5-1-02 (305) 296-5676

CR2E034B (12/01)

~~Attachment 34760~~
~~00000061366~~

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