

2002

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

FILED
Aug 14, 2002 8:00 am
Secretary of State

08-14-2002 90025 017 ***150.00

DOCUMENT # P00000098300

1. Entity Name

CHEERIO CHARTERS, INC.

DO NOT WRITE IN THIS SPACE

B0134333

2. Principal Place of Business

6630 MALONEY AVE

Suite, Apt. #, etc.

UNIT 5

3. Mailing Address

6630 MALONEY AVE

Suite, Apt. #, etc.

UNIT 5

City & State

KEY WEST, FL

City & State

KEY WEST, FL

Zip

33040

Country

Zip

33040

Country

4. FEI Number

65-1050619

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

LOGAN, RYON

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

6630 MALONEY AVE, UNIT 5

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

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)☐

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	D
NAME	LOGAN, RYON
STREET ADDRESS	6630 MALONEY AVE, UNIT 5
CITY-ST-ZIP	KEY WEST, FL 33040

TITLE	
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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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

Cherrio's Charters, Inc.
6630 Maloney Avenue, Unit 5
Key West, FL 33040

P000000098300

July 5, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Certified return receipt # 7002 0510 0001 9437 1251

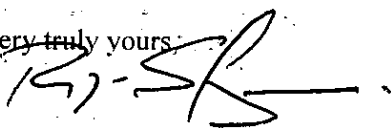
Ladies and Gentlemen:

While my accountant was updating my 2002 books, she asked me if I had paid the 2002 Uniform Business Report fees. I told her that I did not receive any form in the mail and accordingly did not send anything in. I am sending you a form that we had to fill out and the \$150 payment.

Given the fact that I did not receive your form this year, I am respectfully requesting that the penalties be abated. My accountant will provide me with a blank form so that in the future I send the blank one in, in the event I do not receive your form.

Thank you in advance for your most valuable cooperation.

Very truly yours,



Ryon Logan
Owner