

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000082755

Entity Name: STOCKUP INC.**Current Principal Place of Business:**1451 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33319**Current Mailing Address:**291 SW 83RD AVE
NORTH LAUDERDALE, FL 33068 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLQUHOUN, BRUNY
1451 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33319 US*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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name CLERGE, BENEDICK
Address 291 SW 83RD AVE
City-State-Zip: NORTH LAUDERDALE FL 33068

Title DIRECTOR
Name DARIS, KETNER
Address 8220 SW 22 ST D111
City-State-Zip: NORTH LAUDERDALE FL 33068

Title DIRECTOR
Name JEANCHARLES, KENS CARTER
Address 16089 GARRETT GROVE CT
City-State-Zip: JACKSONVILLE FL 32218

Title DIRECTOR
Name EVENEL, OBAS
Address 1451 WEST CYPRESS CREEK ROAD
City-State-Zip: FORT LAUDERDALE FL 33319

Title VP
Name COLQUHOUN, MACHEL
Address P.O. BOX 670291
City-State-Zip: CORAL SPRINGS FL 33067

Title PRESIDENT
Name HARRY, NATHALIE
Address 6621 WINFIELD BLVD UNIT 6
City-State-Zip: MARGATE FL 33063

Title DIRECTOR
Name MORIVAL, LAURA
Address 3645 FOUNTAIN MIST DRIVE UNIT 201
City-State-Zip: TAMPA FL 33614

Title DIRECTOR
Name JEAN PIERRE, KAREN
Address 1451 WEST CYPRESS CREEK ROAD
City-State-Zip: FORT LAUDERDALE FL 33319

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CLERGE , BENEDICK**CEO****03/10/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SAINT JULIEN, JIMMY
Address	1451 WEST CYPRESS CREEK ROAD
City-State-Zip:	FORT LAUDERDALE FL 33319