

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091826

FILED
Apr 07, 2004
Secretary of State

Entity Name: ANCORA BY POTES DESIGN, INC.

Current Principal Place of Business:

223A MIRACLE MILE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

223A MIRACLE MILE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 52-2379639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JUAN CARLOS POTES
10660 SW 82 AVE
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPSD () Delete
Name: POTES, JUAN CARLOS
Address: 10660 SW 82ND AVE
City-St-Zip: MIAMI, FL 33156

Title: DT () Delete
Name: SABBAGH, NELSON
Address: 10660 SW 82ND AVE
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: POTES, JUAN CARLOS
Address: 10660 SW 82ND AVE
City-St-Zip: MIAMI, FL 33156

Title: SEC (X) Change () Addition
Name: SABBAGH, NELSON
Address: 10660 SW 82ND AVE
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: NELSON SABBAGH

SEC

04/07/2004

Electronic Signature of Signing Officer or Director

Date