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Apr 07 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M84103

(4)

1. Corporation Name

MR. POTTERY OF NORTH MIAMI, INC.

Principal Place of Business

18729-BISCAYNE BLVD  
AVENTURA FL 33180  
US

Mailing Address

1983 TIGERTAIL BLVD  
DANIA FL 33004-2104  
US

3. Date Incorporated or Qualified  
05/31/1988

3a. Date of Last Report  
04/08/1996

4. FEI Number  
65-0060343

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 18729 BISCAYNE BLVD.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

Country

27 City & State

28 Zip

29

Country

30

9. Name and Address of Current Registered Agent

ALTSHULER, LANNY  
1983 TIGERTAIL BLVD  
DANIA FL 33004

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT  
NAME ALTSHULER, LANNY  
STREET ADDRESS 1983 TIGERTAIL BLVD  
CITY, ST, ZIP DANIA FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

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CITY, ST, ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LANNY ALTSHULER

2/17/97

954-920-0755

Date

Daytime Phone #

CR2E034 (9/96)