

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000011563

1. Entity Name

POTENTIAL GROWTH CORPORATION ✓

Principal Place of Business

Mailing Address

2. Principal Place of Business

19741 SW 114 AVE.

Suite, Apt. #, etc.

#161

3. Mailing Address

P.O. Box 972786

Suite, Apt. #, etc.

City & State

MIAMI - FLORIDA

City & State

MIAMI - FLORIDA

4. FEI Number

650988724

Applied For

Not Applicable

Zip

33177

Country

DADE

Zip

33197

Country

DADE

5. Certificate of Status Desired

✗

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Serge Michel Edouard

19741 SW 114 AVE. #161

MIAMI - FLORIDA

33197

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Serge M. Edouard

President

MAY-9-2001

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)

✗

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

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

(P) Serge Michel Edouard
19741 SW 114 AVE. #161
MIAMI - FLORIDA 33177

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Serge M. Edouard

MAY-9-2001

Date

Daytime Phone #

(786) 242-9169

D0056164

DO NOT WRITE IN THIS SPACE

CR2E034 (1/1/00)