2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Mar 02, 2007 08:00 AM DOCUMENT # P00000093105 **Secretary of State** POTTERY WORLD, INC. Principal Place of Business Mailing Address 908 AIRPORT ROAD 908 AIRPORT ROAD DESTIN FL 32541 DESTIN FL 32541 2. Principal Place of Business - No P O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite Apt #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-3674546 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TAN, HEE HUAT 908 AIRPORT ROAD Street Address (P.O. Box Number is Not Acceptable) DESTIN FL 32541 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. IIILE HILE Change ☐ Addition ☐ Delete WONG, KIM THYE NAME NAME 908 AIRPORT RD STREET ADDRESS STREET ADDRESS DESTIN FL 32541 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Add₁lion HILE TAN, HEE HUAT NAME NAME 03/13/07-90018-008 150.00 908 AIRPORT ROAD STRUET ADDRESS STREET ADDRESS DESTIN FL 32541 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP THE Delete THLC ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP TETLE Delete IIItE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete IIILE NAME NAME STREET ADDRESS STREET AODRESS CITY-SI-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.