## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000133163

Entity Name: POTS IN AMERICA INC.

City-St-Zip:

**FILED** Mar 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 16393 EAST STALLION DR. LOXAHATCHEE, FL 33470 **Current Mailing Address: New Mailing Address:** 16393 EAST STALLION DR. LOXAHATCHEE, FL 33470 FEI Number: 42-1565721 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **ACOUNT TAXES PLUS** 7570 N.W. 14 STREET SUITE 112 MIAMI, FL 33126 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CALDERON, SOCORRO Name: Name: 16393 EAST STALLION DR. Address: Address: City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: ( ) Delete Title: Title: () Change () Addition CALDERON, BERNARDO D Name: Name: 16393 EAST STALLION DR. Address: Address: LOXAHATCHEE, FL 33470

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SOCORRO CALDERON PD 03/25/2008