

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000097465

1. Entity Name

FULL POTENTIAL, INC.

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90053 033 ***150.00

Principal Place of Business

Mailing Address

8240 W. 18 LANE DR.
HIALEAH FL 33014

8240 W. 18 LANE DR.
HIALEAH FL 33014

2. Principal Place of Business

3. Mailing Address

16451 N.W. 67 AV.

1672 SW 103 LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI LAKES FL.

City & State

DAVIE FL.

Zip

33014

Country

U.S.A.

Zip

33324

Country

USA

4. FEI Number

65-0879461

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HERNANDEZ, LEONEL
8240 W 18 LANE DR.
HIALEAH FL 33014

7. Name and Address of New Registered Agent

Name LEONEL HERNANDEZ

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

1672 SW 103 LN

City DAVIE

FL

Zip Code

33324

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

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

PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

1-25-00

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, 2000 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 PTD ☐ Delete
NAME HERNANDEZ, LEONEL
STREET ADDRESS 8240 W. 18 LANE DR.
CITY-ST-ZIP HIALEAH FL 33014

TITLE S ☐ Delete
NAME HERNANDEZ, ILEANA
STREET ADDRESS 8240 W 18 LANE DR.
CITY-ST-ZIP HIALEAH FL 33014

TITLE VP ☐ Delete
NAME HERNANDEZ, MERCEDES
STREET ADDRESS 5811 SW 196 LN
CITY-ST-ZIP FT LAUDERDALE FL 33332

TITLE AVP ☐ Delete
NAME HERNANDEZ, KAROLYN
STREET ADDRESS 8240 W 18 LANE DR.
CITY-ST-ZIP HIALEAH FL 33014

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1672 SW. 103 LN
CITY-ST-ZIP DAVIE FL 33324

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1672 SW. 103 LN
CITY-ST-ZIP DAVIE FL 33324

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5811 S.W 196 LN
CITY-ST-ZIP FT LAUDERDALE FL 33332

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Leonel Hernandez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-00

Date

(305) 826-1896

Daytime Phone #