2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000097465

Entity Name: FULL POTENTIAL, INC.

FILED Jan 04, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1672 SW 103 LN
 3403 WASHINGTON LANE

 DAVIE, FL 33324
 COOPER CITY, FL 33026

Current Mailing Address: New Mailing Address:

1672 SW 103 LN 4430 FAIRFAX DR DAVIE, FL 33324 CUMMING, GA 30040

FEI Number: 65-0879461 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:

HERNANDEZ, LEONEL CAMARDESE, DAVID
1672 SW 103 LN 3403 WASHINGTON LANE
DAVIE, FL 33324 US COOPER CITY, FL 33026 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: DAVID CAMARDESE 01/04/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition Name: HERNANDEZ, LEONEL Name: HERNANDEZ, LEONEL

 Address:
 1672 SW 103 LN
 Address:
 4430 FAIRFAX DR

 City-St-Zip:
 DAVIE, FL 33324
 City-St-Zip:
 CUMMING, GA 30040

Title: S () Delete Title: S (X) Change () Addition Name: HERNANDEZ, ILEANA Name: HERNANDEZ, ILEANA

 Name:
 HERNANDEZ, ILEANA
 Name:
 HERNANDEZ, ILEANA

 Address:
 1672 SW 103 LN
 Address:
 4430 FAIRFAX DR

 City-St-Zip:
 DAVIE, FL 33324
 City-St-Zip:
 CUMMING, GA 30040

Title: AVP () Delete Title: AVP (X) Change () Addition

 Name:
 FIELDS, KAROLYN
 Name:
 FIELDS, KAROLYN

 Address:
 561 NW 208 CIRCLE
 Address:
 4345 FAIRFAX DR

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:
 CUMMING, GA 30040

I hereby certify that the information supplied with this filing does not qualify for the 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: LEONEL HERNANDEZ P 01/04/2006