2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING O

FILED Feb 09, 2001 8:00 am Secretary of State DOCUMENT # P99000015065 POTOMAC HOLDINGS, INC. 02-09-2001 90124 001 ***450.00 Principal Place of Business Mailing Address 3908 26TH ST W 3908 26TH ST W **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0954032 Not Applicable Country .Zip____ Country ___ \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FELDMAN, MARC H Street Ad 3908 26TH ST W **BRADENTON FL 34205** *'205* 8. The above named en itv submits∧bis statement fo se of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed (NOTE: Registered Agent signature required when reinstating) icable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangib 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. **PSTD** ☐ Delete Change ☐ Addition TITLE TITLE JAWITZ, JACK C NAME 2919 26ST W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34205** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/2 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZUP-13. I hereby certify that the information supplied with this filling does not quaindicated on this report or supplemental report is true and accorde and of the corporation or the receiver or trustee employered to execute this. or the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information of signature shall have the same legal effect as if made under oath; that I am an officer or director tas 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

Daytime Phone #