

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 13 PM 2:55

DOCUMENT # S70619

(9)

1. Corporation Name

MR. POTTERY AT FESTIVAL, INC.

Principal Place of Business

**9882 GLADES RD.
BOCA RATON FL 33434
US**

Mailing Address

**451 NE-189 ST
MIAMI FL-33179**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/29/1991

3a. Date of Last Report

04/27/1994

4. FEI Number

65-0279411

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

1983 TIGERTAIL BLVD.

Suite, Apt. #, etc.

27

City & State

28

DANIA, FL.

Zip

29

33004

Country

30

U.S.A.

9. Name and Address of Current Registered Agent

**ALTSHULER, LANNY
451 NE-189 ST
MIAMI FL 33179**

10. Name and Address of New Registered Agent

81 Name

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

1983 TIGERTAIL BLVD.

83

84 City

DANIA

FL

85 Zip Code

33004

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors and hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

LANNY ALTSHULER, PRESIDENT

2/6/95

Signature, typed or printed name of registered agent and the corporation

NOTE: Registered Agent signs this form when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

ALTSHULER, LANNY

451 NE-189TH ST.

MIAMI FL

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 liquidator empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

LANNY ALTSHULER

2/6/95

305-920-0755

Signature and typed or printed name of signing officer or director

Date

Telephone Number