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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPO 1996		ORT		Secretary of State DIVISION OF CORPORATIONS			DNS				
DOCUN 1. Corporation	JENT #	V5683	32	(1)							
POTTE	D EARTH E	TC., INC.									
Principal Place	of Business		Mailin	g Address							
1211 NW 4TH AVE 1211 NW 4TH AVE											
DELRAY BEAC	CH FL 33444		DEL	RAY BEACH FL 33	444						
								3. Date Incorporated or Qualified 08/06/1992		te of Last Re)6/23/199	
2. Principal Pla	ice of Business	······································	2a. M	alling Address			. —	4. FEI Number			Applied For
21 Cuito Ant #			26	Standard Park		<u>-</u>		65-0365420			Not Applicable
Suite, Apt. #	r, etc.		27	uite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State				ity & State				Election Campaign Financing Trust Fund Contribution			0 May Be
Zip		Country	Zi	p	Cou	untry		8. This corporation has liability for	intangible		
24	25]	29		[30]	1	·		□ No		
	9. Name an	d Address of Curr	ent Register	ed Agent		81	Name	10. Name and Address of New F	Registered	Agent	
WDIGHT	DODIC A							J / D.O. D N			
Wright, doris A. 1211 NW 4TH AVE						82	Street Add	dress (P.O. Box Number is Not Acceptab	ое)		
	BEACH FL 3	3444				83					
						84	City		FI	85 Zip	Code
11. Pursuant to	o the provisions	of Sections 607.05	02 and 607.1	508, Florida Statut	es, the abo	Dve-r	named corpo	pration submits this statement for the pu			egistered office
familiar wit	and accept the	he obligations of Sc	orida. Such cr ection 607.05	iange was autnoriz 35. Florida St <u>atut</u> es	rea by the	corp	oration's bo	oration submits this statement for the pu ard of directors. I hereby accept the app	ointment a	is registered	agent. Lam
SIGNATURE	XO	us Nm	Vant tic / Lappi	\mathcal{D}	つくい	U	WUG	47 red when reinstating)	13/	196	
12.	oig pira b, types or pr	OFFICERS A	ND DIRECTO		13.	o Agai	it signature requir	ADDITIONS/CHANGES TO OFF	ICERS AN	ID DIRECTO	RS IN 12
TITLE	DPS			DELETE	1. 1			·		☐ Change	Addition
NAME STREET ADDRESS	WRIGHT, E	oris A. Ato raod C-4			1.2 N		LODDEGO				
CITY-ST-ZIP	BOCA RAT						ADDRESS IT-ZIP				İ
TITLE	VT	VIV.16		DELETE	2 1					☐ Change	Addition
NAME	WRIGHT, J				2.2 N	IAME					
STREET ADDRESS		ATO ROAD C-4					ADDRESS				İ
CITY-ST-ZIP TITLE	BOCA RAT	UN FL		DELETE	3 1		ST - ZiP			Change	Addition
NAME					32 N						
STREET ADDRESS					3.3. \$	STREET	I ADDRESS				ľ
CITY-\$1-ZIP TITLE	· 			DELETE	3.4 C		ST - ZIP			☐ Change	Addition
NAME				La Decen	4. I 4.2 N		1			LI CHANGE	Addition
STREET ADDRESS							ADDRESS				•
CITY-ST-ZIP				Project Section 1			ST - ZIP				
TITLE				DELETE	5 1					Change	Addition
NAME STREET ADDRESS					52 N		ADDRESS				
CITY-ST-ZIP							ST - ZiP				
TITLE				DELETE	61	TITLE				Change	Addition
NAME					62 N						
STREET ADDRESS							ADDRESS				
certify that oath; that I	the information I am an officer o	indicated on this ar	ทนสโ report o poration or tำ	r supplemental ann e receivet or truste	nished and report report	doe is tru	ie and accur	for the exemption stated in Section 119 rate and that my signature shall have the his report as required by Chapter 607, Fi	same leo	al effect as if	made under
SIGNAT		(who	. 2	ME OF SURVING OFFICE	L'	TOR	Dorg	S WRIGHT	3	Daylime Prione	