

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009994

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** BLACK PEARL PIPES & DRUMS, INC.

**Current Principal Place of Business:**

16142 EAST BURNS DRIVE  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

16142 EAST BURNS DRIVE  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 27-1095894

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SCHREIBER, TODD L  
7835 NW 41 STREET  
SUNRISE, FL 33351 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: NAUGENT, MICHAEL A  
Address: 16142 EAST BURNS DRIVE  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: TREA  
Name: SCHREIBER, TODD L  
Address: 7835 NW 41 STREET  
City-St-Zip: SUNRISE, FL 33351

Title: VP  
Name: SUAREZ-BENEJAM, IGNACIO J  
Address: 2904 NW 99TH TRRACE  
City-St-Zip: SUNRISE, FL 33322

Title: SEC  
Name: JOHNSON, NICHOLAS R  
Address: 4645 NW 113TH TERRACE  
City-St-Zip: SUNRISE, FL 33323

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TODD SCHREIBER

TREA

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date