

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000010948

Entity Name: BLACK STALLION OF AMERICA CORP.**Current Principal Place of Business:**4975 NW FITZGERALD AVE
PORT ST. LUCIE, FL 34983-2330**Current Mailing Address:**4975 NW FITZGERALD AVE
PORT ST. LUCIE, FL 34983-2330 US**FEI Number:** 83-2470672**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHAMPAGNE LAW GROUP
470 N.E. 13TH STREET
FORT LAUDERDALE, FL 33304 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	PIERRE-PIERRE, GRACIA MARTIN
Address	4975 NW FITZGERALD AVE
City-State-Zip:	PORT ST. LUCIE FL 34983-2330

Title	VP
Name	CELESTIN, MICHEL
Address	41 NEW SAVANNAH DRIVE
City-State-Zip:	SAVANNAH GA 31405

Title	TR
Name	CHERY PIERRE-PIERRE, SOPHIE
Address	4975 NW FITZGERALD AVE
City-State-Zip:	PORT ST. LUCIE FL 34983-2330

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: GRACIA MARTIN PIERRE-PIERRE

PRESIDENT

02/03/2021

Electronic Signature of Signing Officer/Director Detail_____
Date