
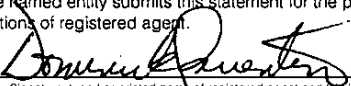
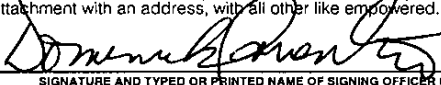


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2005 8:00 am
Secretary of State

02-08-2005 90019 046 ***150.00

DOCUMENT # F00000001929 1. Entity Name BLACKSHEAR CORPORATION					
Principal Place of Business 581705 WHITE OAK ROAD YULEE, FL 32097 US			Mailing Address 581705 WHITE OAK ROAD YULEE, FL 32097 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 13-4040452	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DAVIS, WILLIAM H 581705 WHITE OAK ROAD YULEE, FL 32097				Name Dominick Sorrentino	
				Street Address (P.O. Box Number is Not Acceptable) 581705 White Oak Rd	
				City Yulee	
				FL Zip Code 32097	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: 		Dominick Sorrentino		01/31/05	
Signature, typed or printed name of registered agent and date if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BERGREEN, BERNARD D		NAME		
STREET ADDRESS	111 WEST 50TH STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY 10020		CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DAVIS, WILLIAM H		NAME		
STREET ADDRESS	581705 WHITE OAK ROAD		STREET ADDRESS		
CITY-ST-ZIP	YULEE, FL 32097		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MOODY, NATALIE P		NAME		
STREET ADDRESS	111 WEST 50TH STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY 10020		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CROPPER, STEPHEN W		NAME		
STREET ADDRESS	111 WEST 50TH STREET		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY 10020		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GARRETT, VICTOR		NAME		
STREET ADDRESS	581705 WHITE OAK ROAD		STREET ADDRESS		
CITY-ST-ZIP	YULEE, FL 32097		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	VP	
STREET ADDRESS			STREET ADDRESS	Dominick Sorrentino	
CITY-ST-ZIP			CITY-ST-ZIP	581705 White Oak Rd	
			Yulee, FL 32097		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			01/31/05		904-548-1050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #