

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007755

FILED
Mar 07, 2005
Secretary of State

Entity Name: BLACK ROSE INTERNATIONAL INC.

Current Principal Place of Business:

2803 N 29TH STREET
SUITE B
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

2803 N 29TH STREET
SUITE B
TAMPA, FL 33605

New Mailing Address:

FEI Number: 76-0781124 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MUNNISI, MWIDIMISI
2803 N 29TH STREET
SUITE B
TAMPA, FL 33605 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: D () Delete
Name: JONES, BEVERLY
Address: 6124 WEATHERWOOD CIRCLE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D () Delete
Name: BOUNTING, EDDIE
Address: 3102 E. LAKE AVENUE
City-St-Zip: TAMPA, FL 33610

Title: D () Delete
Name: SEAR, PHILLIS
Address: 3108 MAYAPPLE COURT
City-St-Zip: CHESAPEAKE, VA 23323

Title: D () Delete
Name: MUNNISI, MWIDIMISI
Address: 2803 N 29TH STREET, SUITE B
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MWIDIMISI MUNNISI

D

03/07/2005

Electronic Signature of Signing Officer or Director

Date