

2001 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 22, 2001 8:00 am
Secretary of State

04-18-2001 90022 028 ***150.00

DOCUMENT # P00000078512

1. Entity Name

BLACK AMBER FLORIDA, INC.

Principal Place of Business

**C/O EDWARDS & AGGELL LLP
 250 ROYAL PALM WAY, STE 300
 PALM BEACH FL 33480**

Mailing Address

**C/O EDWARDS & AGGELL LLP
 250 ROYAL PALM WAY, STE 300
 PALM BEACH FL 33480**

2. Principal Place of Business

c/o Edwards & Angell LLP
 Suite, Apt. #, etc.

3. Mailing Address

c/o Edwards & Angell LLP
 Suite, Apt. #, etc.

One North Clematis, Suite 400

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33401

Country

US

Zip

33401

Country

US

6. Name and Address of Current Registered Agent

**ANGELL CORPORATE SERVICES, INC.
 250 ROYAL PALM WAY, STE 300
 PALM BEACH FL 33480**

7. Name and Address of New Registered Agent

Name
Angell Corporate Services, Inc.
 Street Address (P.O. Box Number is Not Acceptable)
One North Clematis, Suite 400

City
West Palm Beach

FL

Zip Code
33401

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.

Angell Corporate Services, Inc.

SIGNATURE By:

Jonathan E. Cole
Jonathan E. Cole, President

3/6/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
D
 NAME
ALLAN, RUSSELL
 STREET ADDRESS
250 ROYAL PALM WAY, STE 300
 CITY-ST-ZIP
PALM BEACH FL 33480

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
Allan, Russell
 NAME
One North Clematis, Suite 400
 STREET ADDRESS
West Palm Beach, FL 33401

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 5/2001
 Date

(416) 449-1340
 Daytime Phone #

CR2E034 (10/00)