

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080135

FILED
May 01, 2006
Secretary of State

Entity Name: THE BLACK INVENTORS' CLUB, INC.

Current Principal Place of Business:

2421 REEF COURT
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2649
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-3663136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JOCELYN
2421 REEF COURT
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

JONES, JOCELYN
2421 REEF COURT
ORLANDO, FLORIDA, FL 32805 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:

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHAW, NOLLIE
Address: 2421 REEF CT.
City-St-Zip: ORLANDO, FL 32805

Title: DVP () Delete
Name: ISAACS, KARL
Address: 4824 NATIVE DANCER LANE
City-St-Zip: ORLANDO, FL 32826

Title: DVP () Delete
Name: LOPEZ, ROBERTO
Address: 239 BAY HEAD DRIVE
City-St-Zip: KISSIMMEE, FL 34743

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NOLLIE S. SHAW

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date