2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P03000057680 03-05-2004 90019 011 ***150.00 1. Entity Name **BLACK POINT CORP.** Principal Place of Business Mailing Address JAUNGGGG 1013 BAMBOO LN 1013 BAMBOO LN WESTON, FL 33327-2419 WESTON, FL 33327-2419 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02182004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 71-0947984 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELIAS, SILVIA E Street Address (P.O. Box Number is Not Acceptable) 1013 BAMBOO LN WESTON, FL 33327-2419 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE TITI F Delete Change ☐ AdditIon ELIAS, SILVIA E. ELISA, SILVIA E NAME 1013 BANBOOLN STREET ADDRESS 1013 BAMBOO LN STREET ADDRESS WESTON, FL 33327-2419 CITY-ST-ZIP CITY-ST-ZIP WESTON, FL 333272419 TITLE Delete TITI F ☐ Change Addition ARIEL MALDONADO NAME 1013 BANBOO LN STREET ADDRESS STREET ADDRESS WESTON FL 33327-2419 CITY-ST-ZIP CITY-ST-7IP TITI F TITLE ☐ Change **☑** Addition ☐ Delete NAME NAME DIANA MALDONADO 1013 BAHBOO LN STREET ADDRESS STREET ADDRESS WESTON, FL 33327-2419 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change **Addition** GERGOGIAM MORAPH NAME NAME 1013 BAMBOOLN STREET ADDRESS STREET ADDRESS WESTON, FL 33327-2419 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change X Addition ANABEL MALDONADO NAME NAME 1013 BAMBOO LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WESTOD, FL 33327-2419 ☐ Change TITI F TITI F □ Defete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGN

FILED Mar 05, 2004 8:00 am