

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90472 030 ***150.00

DOCUMENT # P04000062682

1. Entity Name
BLACK PEARL GROUP, INC.



Principal Place of Business
**850 IVES DAIRY ROAD
T-51
MIAMI, FL 33179**

Mailing Address
**19742 NW 88 AVE
MIAMI, FL 33018**

60032671



04262006 Chg-P CR2E034 (11/05)

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

73-1700733

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SABIR, HASHID ESQ.
18350 NW 2 AVE STE 500
MIAMI, FL 33169**

7. Name and Address of New Registered Agent

Name **Nashid Sabir ESQ**
Street Address (P.O. Box Number is Not Acceptable)
**18350 N.W. 2 Ave
STE 500**
City **Miami Gardens** FL Zip Code **33169**

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 **Nashid Sabir Attorney**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

04-26-06
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **CEOD** ☐ Delete
NAME **SABIR, CHRISTIE OGBU**
STREET ADDRESS **19742 NW 88 AVE**
CITY-ST-ZIP **MIAMI, FL 33018**

TITLE **DCFO** ☐ Delete
NAME **DAVIDSON, JANET BLACK**
STREET ADDRESS **19800 NW 12 CT**
CITY-ST-ZIP **MIAMI, FL 33169**

TITLE **P** ☐ Delete
NAME **DAVIDSON, JANET BLACK**
STREET ADDRESS **19800 NW 12 CT**
CITY-ST-ZIP **MIAMI, FL 33169**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: **Janet Black Davidson** **04-26-06** **305-655-9900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #