

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000087680

1. Entity Name

BLACK PEARL CREATIONS, INC.

FILED

Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90106 047 ***150.00

Principal Place of Business

1730 TREE BLVD.
UNIT 5
ST. AUGUSTINE FL 32086

Mailing Address

1730 TREE BLVD.
UNIT 5
ST. AUGUSTINE FL 32086

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 59-3286126

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALCOTT, STEPHEN
611 A1A BCH BLVD
ST. AUGUSTINE FL 32084

Name

STEPHEN WALCOTT

Street Address (P.O. Box Number is Not Acceptable)

208 N. WHITNEY ST.

City ST. AUGUSTINE

FL

Zip Code 32084

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.

SIGNATURE

Stephen M. Walcott

STEPHEN M. WALCOTT / PRESIDENT

1-11-01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT
NAME WALCOTT, STEPHEN
STREET ADDRESS 3720 B. ROSEWOOD ST.
CITY-ST-ZIP ST. AUGUSTINE FL 32084 ☐ Delete

TITLE DPT
NAME WALCOTT, STEPHEN
STREET ADDRESS 208 N. WHITNEY ST.
CITY-ST-ZIP ST. AUGUSTINE, FL. 32084 ☒ Change ☐ Addition

TITLE DVS
NAME SCHEMMEL, MICHAEL
STREET ADDRESS 3720 B ROSEWOOD ST.
CITY-ST-ZIP ST. AUGUSTINE FL 32084 ☐ Delete

TITLE DVS
NAME SCHEMMEL, MICHAEL
STREET ADDRESS 7218 THOMAS JEFFERSON CIRCLE W.
CITY-ST-ZIP BARTOW, FL. 33830 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Stephen M. Walcott

STEPHEN M. WALCOTT

1-11-01 (904) 808-7006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)