

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000052934

1. Entry Name

PEARLESCENT INC.

Principal Place of Business

350 LINCOLN RD. STE. 406  
MIAMI FL 33139

Mailing Address

350 LINCOLN RD. STE. 406  
MIAMI FL 33139

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

KHIANI, DEEPAK  
350 LINCOLN RD. STE. 406  
MIAMI FL 33139

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

DEEPAK KHIANI  
350 LINCOLN RD ST 406  
MIAMI BEACH FL 33139

☐ Change ☒ Addition

TITLE S/D  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

JAISHRI KHIANI  
350 LINCOLN RD ST 406  
MIAMI BEACH FL 33139

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change ☐ Addition

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: SIG DEEPAK KHIANI RED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/00

305-672-2264

Daytime Phone #

APPROVED  
AND  
FILED

00 AUG 21 PM 12:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number 650942708

Applied For  
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

FILED

8

*[Handwritten Signature]*

199000052934  
A0069834  
Attach pg 20

July 19, 2000

To whom it may concern:

This is to inform you that this entity (Pearlescent Inc.) did not receive a 2000 Uniform Business Report prior to this second notice.

Sincerely,

*Deepak Khiani*

Deepak Khiani  
President