

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052934

Entity Name: PEARLESCENT INC.

FILED
Jan 05, 2004
Secretary of State

Current Principal Place of Business:

9A HARMON COVE TOWER
STE 9A
SECAUCUS, NJ 07094

New Principal Place of Business:

Current Mailing Address:

9A HARMON COVE TOWER
STE 9A
SECAUCUS, NJ 07094

New Mailing Address:

FEI Number: 65-0942708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KHIANI, JAISHRI
1925 BRICKELL AVE
D1204
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KHIANI, DEEPAK
Address: 3 W 46TH ST STE 405
City-St-Zip: NEW YORK, NY 10036

Title: SD () Delete
Name: KHIANI, JAISHRI
Address: 1925 BRICKELL AVE #D1204
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KHIANI, DEEPAK
Address: 9A HARMON COVE TOWER
City-St-Zip: SECAUCUS, NJ 07094

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 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 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: DEEPAK KHIANI

PD

01/05/2004

Electronic Signature of Signing Officer or Director

_____ Date