

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S73853**

(1)

1. Corporation Name

THE BLACK & BLUE TRADING CO.



Principal Place of Business

Mailing Address

7907 N.W. 53RD ST.
#194
MIAMI FL 33166

7907 N.W. 53RD ST.
#194
MIAMI FL 33166

2. Principal Place of Business

21 16300 NE 19TH AVE

Suite, Apt. #, etc.

22 215

City & State

23 N. MIAMI BEACH FL

Zip

24 33162

Country

25 DADE

2a. Mailing Address

26 16300 NE 19TH AVE

Suite, Apt. #, etc.

27 215

City & State

28 N. MIAMI BEACH FL

Zip

29 33162

Country

30 DADE

9. Name and Address of Current Registered Agent

GERBER, DANIEL E.
7907 N.W. 53RD STREET
#194
MIAMI FL 33166

3. Date Incorporated or Qualified

08/16/1991

3a. Date of Last Report

06/30/1995

4. FEI Number

65-0277069

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and FEI, if applicable

(Print) Registered Agent's signature required when re-appointing

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
GERBER, DANIEL E.
STREET ADDRESS
7907 N.W. 53RD ST. #194
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
DIAS, SYLVIA
STREET ADDRESS
7907 NW 53RD ST., #194
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/12/96 (305) 949-8766
Date Daytime Phone #

CR2E034 (12/95)