### Please provide the following Information about your business Please select what best describe your business. • Existing Business (in operation more than six (6) months) **Business Name** Form of Ownership The Agape Experience Sole Proprietor **Business Address** 6516 N 32nd St. Omaha, Nebraska 68112 **United States** Date the business was established 07/03/2020 **Company representative First Name Last Name** Diedra Williams **Phone Number Email** (901) 343-7734 diedrawilliams24@yahoo.com Name of Presenter

#### More about your business

Diedra Williams

Nature of business - include a brief description of the product/service and the nature of your market. Submit product brochures, links to social media sites, and any other company literature. Please only share non-confidential.

The Agape Experience is an all-natural skincare business. We are currently in Hyvee on Cass Street. We infuse our products with essential oils to provide aromatherapy, fade hyperpigmentation and heal scars. We also make products to soothe eczema and reduce flare ups. Our motto is; We Care, Self-Care.

### Goals for joining the accelerator

Exposure and Expansion, a mentor

### Headshot of the company's CEO

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Does the business own all rights (including intellectual property) to the material submitted and presented for this competition?

#### Describe your business, product or service and what differentiates it from your competitors.

Our products are based in the belief of homeostasis. We believe in Self-care and our products are birthed from this thought process. Our products are all natural and minority driven. We incorporate ingredients for the purpose of aromatherapy, pain and aiding in the lack of self-care in women and men. Have you ever seen anyone shower or put on lotion in pure joy? That is the feedback we receive from out customer. We create self-care packages and bundles that work.

## Current status or stage of development of business: (e.g. working on prototype, produce in advanced development, etc.)

We are still in the beginning stages of our business.

# Current sales revenue (dollar volume per month)

What is your gross annual revenue? (dollar volume per year)

\$1,000.00 \$12,000.00

Number of employees (include principals)

### Projected Number of employees in 12 months

Part Time	Full Time	Part Time	Full Time
	1	4	2

Is this your primary business?

Is this your original concept?

Yes

Please specify your ethnicity. What is your age?

African-American 45 or Above

Is the business owned by a veteran?

Is at least 51% of the business owned and controlled by a woman?

Yes

Is your company a small business?

Do you have any investors or partners?

Yes No

Is your business currently licensed or registered in the State of Nebraska or Iowa?

Is at least 51% of the business is owned, and controlled by an ethnic minority and please specify which one.

yes, African American

### Type of financing used to operate a business to date

• Personal Resources

No

No

#### Status of Business Plan

In preparation and available by					
Indicate date available by					
02/05/2023					
Would you like free business advisory assistance in writing a business plan?					
Yes					
pes of business assistance needed (Check all that apply)					
Business Strategic Plan development	Promotion and marketing assistance	Business Networking Opportunities			
<ul> <li>Funding for start-up and maintenance</li> </ul>	Service Training/Educational	Commercialization			
Do you need help building yo	al?				
Yes					
Please explain what services Accelerator Program:	ase explain what services you or your organization can offer other clients of the Business elerator Program:				
Business, in Organizational Lead	,	Science at Bellevue Universities College of financial coach for the Financial Hope Metropolitan Community College.			
Consent 1					
✓ I understand the Pitch Black Accelerator Program is designed to support the Midlands African Chamber emerging businesses to succeed and thrive. Participating in the Pitch Black Accelerator Program necessita interaction with the assigned mentor, attendance at educational and networking sessions, and reporting to Midlands African Chamber on business changes. Once selected as a Pitch Black Accelerator participant, I remains the program of the pitch black Accelerator participant, I remains the pitch black Accelerator program is designed to support the Midlands African Chamber and I remains the pitch black Accelerator Program is designed to support the Midlands African Chamber and I remains the pitch black Accelerator Program necessitation in the Pitch Black Accelerator Pro					

✓ By registering and participating in this program, I consent to the recording of my likeness, image and/or voice and authorize the Midlands African Chamber to use photographs, videos, and audio recordings containing my

become a member of the Midlands African Chamber.

likeness, image and/or voice in any medium for any purpose

✓ I agree to the terms and conditions of the <u>Pitch Black Accelerator Program</u>.

**Consent 2** 

**Consent 3** 

**Applicant's Name** 

Diedra Williams

**Applicant's Title** 

Owner

Date	Signature	
01/27/2023	Diedra Williams	