


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR -9 AM 10:25

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L96000000880**

BBIG SHIP CO., L.C.
456 W DAVIS BLVD
TAMPA FL 33606

1a. Principal Place of Business Address

456 W DAVIS BLVD
TAMPA FL 33606

2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt #, etc.	Suite, Apt #, etc.	08/14/1996	FL
City & State	City & State	4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	59-3406462	
		5. Date of Last Report	6. Certificate of Status Desired
		05/07/1998	<input type="checkbox"/> See 7b Additional Fee Required

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
MARTINEZ, NERI 456 W DAVIS BLVD TAMPA FL 33606	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc. City Zip Code FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____

10. Title	Managing Members/Manager	Business Street Address	City, State and Zip Code
MGRM	BLOCK, WINSTON J	19 W. JEFFERSON STREET	JOLIET IL

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****188.75 ****188.75

11. I do 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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:  2/23/99