2006 FOR PROFIT CORPORATION ANNUAL REPORT.

SIGNATURE:

May 03, 2006 8:00 am DOCUMENT # P05000095809 Secretary of State BIG DADDY'S BARBEQUE, INC. 04-19-2006 90081 047 ***150.00 Mailing Address Principal Place of Business 4530 ASHBURY ST. 4530 ASHBURY ST. PACE, FL 32571 PACE, FL 32571 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Sulte, Apt. #, etc. 04142006 Chg-P CR2E034 (11/05) 203106156 City & State City & State Applied For Not Applicable Žin Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **BASS AND SANDFORT ACCOUNTANTS PA** Street Address (P.O. Box Number is Not Acceptable) 1301 W GARDEN ST PENSACOLA, FL 32501 City Zio Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Sonature, types or printed name of registered apent and title 1 applicable. (NOTE: Registered Agent agreature required when reinstating) OATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PD TITLE Delete TITLE ☐ Change ☐ Addition WEAVER, MICHAEL NAME NAME 4530 ASHBURY ST STREET ADDRESS STREET ADDRESS CITY-ST-7IP PACE, FL 32571 CITY-ST-7IP STD ☐ Delete ☐ Change ☐ Addition TITLE WEAVER, ROBIN NAME NAME STREET ADDRESS 4530 ASHBURY ST STREET ADDRESS PACE, FL 32571 CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - 71P 12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 it changed, or on an algorithm with an adjress, with all other like empowered.

FILED