

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119324

Entity Name: BIG TWIST, INC.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

5994 SEMINOLE BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

5994 SEMINOLE BLVD
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 20-3390831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINOR, CECELIA
10399 CIRIMOYA LANE
SEMINOLE, FL 33772 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: D () Delete
Name: MCCAULEY, JONATHAN
Address: 10399 CIRIMOYA LANE
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: MINOR, CECELIA
Address: 10399 CIRIMOYA LANE
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MCAULEY, JONATHAN
Address: 10399 CIRIMOYA LANE
City-St-Zip: SEMINOLE, FL 33772

Title: S/T (X) Change () Addition
Name: MINOR, CECELIA
Address: 10399 CIRIMOYA LANE
City-St-Zip: SEMINOLE, FL 33772

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CECELIA F. MINOR

S/T

04/27/2006

Electronic Signature of Signing Officer or Director

Date