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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

S77677 **DOCUMENT #** 

(0)

BIG BI	EN ENTERPRISES, INC.							177	
Principal Place of Business Mailing Address						T 18011010 JEL JUBI) JUBIU BIIIL HAUL		III MIMIE MANEL	B1011 01011 (00)
133 TROPIĆ DAYTONA BI		BOX 9095 Tona Beahc Fl 32120							
		U\$				3. Date Incorporated or Qualified	1 '	e of Last Re	
		,,y				08/30/1991	0	6/28/199	
er a	ace of Business	2a. Mailing Address				4. FEI Number		<del></del>	Applied For
21		26				59-3085239			Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	ired S8.75 Additional Fee Required		
City & State	0	City & State	<u> </u>			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			d to Fees
7	Gountry	Zip	Cou	untry		8. This corporation has liability for		ax under s	199.032,
24	25	29	30			Florida Statutes  No			
	9. Name and Address of Curre	ent Registered Agent		241		10. Name and Address of New F	Registered	Agent	
				81					
SWIECICKI, BENJAMIN W., JR.				82	Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
133 TROPIC BIRD CT				83					-
DAYTO	NA BEACH FL 32119			63					
				84	City		FI	85 Zip	p Code
14 Duc- part	to the previouse of Sections 607.050	2 and 607 1508. Florida Statut	toe the shr	7 - L	named cornor	ration submits this statement for the purific of directors. I hereby accept the app		e	enistered office
or register familiar wi SIGNATURE	ed agent, or both, in the State of Flo th, and accept the obligations of, Se Signature, typical or printed name of registered age	ction 607,0505, Florida Statute	S.			d when rematating:	DATE		agent. ram
12.	OFFICERS AND DIRECTORS			1 7911	il zigrizitire reduce	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
i i i i i i i i i i i i i i i i i i i	<b>DPT</b> DELETE		13. 1.11	TILE				Change	Addition
NAME	SWIECICKI, BENJAMIN, JR.		12 N	1.2 NAME					
STREET ADORESS	133 TROPIC BIRD CT		1.3 \$	1.3 STREET ADDRESS					
Sity - ST - ZiP	DAYTONA BEACH FL		1.4 C	ITY-S	IT-ZIP				
10113	SV DELETE			MLE				Change	Addition
NAME	SWIECICKI, BENJAMIN JR		22 N	2 NAME					
STREET ADDRESS	133 TROPIC BIRD CT		235	TREET	ADDRESS				
CIY-SI-ZP	DAYTONA BEACH FL		24 C	11y - 5	T-ZIP				
TiflE		DELETE	3 1 711					Change	☐ Addition
NAME			32 N	AVE					
STREET ADDRESS			335	STREET	T ADDRESS				
CLIANSINSIS					ST - 21P				FD 42/8-
11"1.6		☐ DELETE	4 1 101					Change	☐ Addition
NAME				IAVE					
SUPPER ADDRESS					ADDRESS				1
CHY-51-ZIP	Fil be, pre			4.4 CHY-ST-ZIP 5.1 TI'LE				☐ Change	Addition
TITLE		☐ DELETE			-				
NAM1			52 N		4000000				
STREET ADDRESS					ADDRESS				1
CITY-S1-7IF		DELETE		HY+S Title	ST-ZIP			☐ Change	Addition
TITLE		El perese	- 1	IAME					
NAME:			0.2 0	1/3 VIL					,

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 certify 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.

6.3 STREET ADDRESS 64 CITY - ST-ZIP

SIGNATURE:

STREET ADDRESS

9047569724

CR2E034 (12/95)