

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000072321

**Entity Name:** BIGAD, LLC**Current Principal Place of Business:**2121 PONCE DE LEON BLVD STE 11TH FLOOR  
CORAL GABLES, FL 33134**Current Mailing Address:**2121 PONCE DE LEON BLVD STE 11TH FLOOR  
CORAL GABLES, FL 33134**FEI Number:** 61-1763959**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US*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

**Authorized Person(s) Detail :**

Title MGR  
Name ERDEI, GUILLERMO E  
Address 2121 PONCE DE LEON BLVD STE  
11TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name BYSKUBIEZ, IRENE B  
Address 2121 PONCE DE LEON BLVD STE  
11TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name ERDEI, ALAN  
Address 2121 PONCE DE LEON BLVD STE  
11TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name ERDEI, BRENDA  
Address 2121 PONCE DE LEON BLVD STE  
11TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name ERDEI, DYLAN  
Address 2121 PONCE DE LEON BLVD STE  
11TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GUILLERMO ERDEI**MANAGER****04/25/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date