

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.**  
**AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

PROFIT CORPORATION  
 ANNUAL REPORT  
 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **579953** (1)  
 1. Corporation Name  
**BIG J CORP.**

**FILED**

97 OCT 13 AM 11:16

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



**REINSTATEMENT** 91  
 DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**9034 SW 132 LANE**  
**MIAMI FL 33176**  
**US**

Mailing Address  
**9034 SW 132 LANE**  
**MIAMI FL 33176**  
**US**

3. Date Incorporated or Qualified **07/24/1978** 3a. Date of Last Report **07/25/1996**  
 4. FEI Number **59-1940585** Applied For Not Applicable  
 5. Certificate of Status Desired  **\$8.75** Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business  
 21 **9064 S.W. 132 Lane** 26 **9064 S.W. 132 Lane**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 22 **Miami** 27 **miami**  
 City & State City & State  
 23 **Florida** 28 **Florida**  
 Zip Country Zip Country  
 24 **33176** 25 **U.S.A.** 29 **33176** 30 **U.S.A.**

9. Name and Address of Current Registered Agent  
**FEANNY, SUZANNE**  
**9034 SW 132ND LANE**  
**MIAMI FL 33176**

10. Name and Address of New Registered Agent  
 81 Name **Same**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**9064 S.W. 132nd Lane**  
 83  
 84 City **miami** FL 85 Zip Code **33176**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  
 SIGNATURE *Suzanne Feanny* DATE **Oct. 10th 97.**

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>JOSEPH, CLAUDE A</b>	
STREET ADDRESS	<b>9819 SW 147TH PLACE</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>JOSEPH, ALBERT</b>	
STREET ADDRESS	<b>9819 SW 147TH PLACE</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE	<b>M</b>	<input type="checkbox"/> DELETE
NAME	<b>FEANNY, SUZANNE</b>	
STREET ADDRESS	<b>9034 SW 132ND LAND</b>	
CITY-ST-ZIP	<b>MIAMI FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>000002326090--4</b>
1.4 CITY-ST-ZIP	<b>-10/21/97--01081--014</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>****750.00 ****750.00</b>
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *Suzanne Feanny* DATE: **Oct 10th 97 (20c) 254-14121**

CR2E034 (4/97)