

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004781

Entity Name: BIG M, INC.

FILED
Jun 24, 2009
Secretary of State

Current Principal Place of Business:

12 VREELAND AVE
TOTOWA, NJ 07512

New Principal Place of Business:

Current Mailing Address:

12 VREELAND AVE
TOTOWA, NJ 07512

New Mailing Address:

FEI Number: 22-2118631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANDELBAUM, LAURENCE H
Address: 12 VREELAND AVE
City-St-Zip: TOTOWA, NJ 07512

Title: DC () Delete
Name: MANDELBAUM, KEN M
Address: 12 VREELAND AVE
City-St-Zip: TOTOWA, NJ 07512

Title: DPS () Delete
Name: MANDELBAUM, ALAN W
Address: 12 VREELAND AVE
City-St-Zip: TOTOWA, NJ 07512

Title: D () Delete
Name: MANDELBAUM, MICHAEL
Address: 12 VREELAND AVE
City-St-Zip: TOTOWA, NJ 07512

Title: DC (X) Delete
Name: SCHWARTZ, STUART
Address: 12 VREELAND AVE
City-St-Zip: TOTOWA, NJ 07512

Title: CEO (X) Delete
Name: SCHWARTZ, STUART
Address: 12 VREELAND AVE
City-St-Zip: TOTOWA, NJ 07512

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ALAN MANDELBAUM

DPS

06/24/2009

Electronic Signature of Signing Officer or Director

Date