FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003556 (7)

BIG SMITH BRANDS, INC.

Principal Place of Business Mailing Address						88(N) 98(N) 98(88 NNA) 9(N) 80(N) 80(N) 1881
7100 WEST CAMINO REAL SUITE 109 BOCA RATON FL 33433		7100 WEST CAMINO REAL SUITE 109 BOCA RATON FL 33433		DO NOT WRITE IN THIS SPACE		
U\$		us			3. Date Incorporated or Qualified 07/07/1994	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		13-3005371	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	y	8. This corporation owes or has p	
24	25	29	30		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New F	Registered Agent
LEBOWITZ, PETER			81	Name		
7300 WEST CAMINO REAL			82 Street Ad		dress (P.O. Box Number is Not Accept	able)
STE. #109			83			
ВО	CA RATON FL 33433					
			84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				e-named co	rporation submits this statement for the	purpose of changing its registered
office or registered agent, or both, in the State of Forida 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						
	Signature, typed or printed name of registered a	agent and title if applicable (NO ND DIRECTORS	TE Registered Ag	ent signature req	uired when reinstating)	DATE FICERS AND DIRECTORS IN 12
12. TITLE	CPD	DELETE	1.1 TITLE	- 	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	LEBOWITZ, PETER		1.2 NAME			
STREET ADDRESS	2340 MILANO CT			1 ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-	i	•	_
TITLE	VP	DELETE	2.1 TITLE		VP	Change Addition
NAME	PETERSON, RAYMOND	1.	2.2 NAME		JOHN BAGDASIAN	
STREET ADDRESS			2.3 STREE	1 ADDRESS	400 S POINTE DR.	IINTT #2010
CITY-ST-ZIP	SPRINGFIELD MO 65809		2. 4 CITY-	ST-ZIP	MIAMI BEACH, FL.	33130
TITLE	VPCF	DELETE 3.1 T			THE PEROITY IS	Change Addition
NAME	DOBER, TERRY L		3.2 NAME			
STREET ADDRESS	2155 PRIVATE RD		3.3 STREE	1 ADDRESS		
CITY-ST-ZIP	MONETT MO	DELETE	3.4 CITY-	ST-ZIP		Change Addition
TITLE	8	□ DECEIE	4.1 TITLE	.		Change Addition
NAME	KAPLAN, HOWARD	`	4. 2 NAME	·		
STREET ADDRESS	10590 STONEBRIDGE BLVE	J.	•	T ADDRESS		
CITY-ST-ZIP TITLE	BOCA RATON FL D	DELETE	4.4 CiTY - 5.1 TiTLE	51-ZIP		Change Addition
NAME	SHAPS, JULIAN H.		5.2 NAME			- • -
STREET ADDRESS	19-622 BAY COVE DR.			T ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		5.4 CITY-			
TITLE	D	DELETE	6.1 TITLE			Change Addition
NAME .	FREEMAN, GLEN		6.2 NAME			
STREET ADDRESS	RT. 6, BOX 50			1 ADDRESS		
CITY-ST-ZIP	CARTHAGE MO		6 4 CITY-			

14. Thereby 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 if changed or image attachment with at address.

CHZE034 (10/97)

May 13 1998 8:00am

Secretary of State