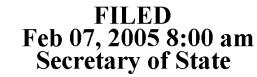
2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)



1. Entity Name: ** ' LO4000022001						Secretary of State					
BIG GROU	JP, LLC					02	-07-2005 90286	5 042 ****5	50.00		
Principal Place of Business			Mailing Address	Mailing Address							
150 SOUTH PINE ISLAND ROAD SUITE 540 PLANTATION FL 33324 US			SUITE 540	PLANTATION FL 33324			20008258				
2. Principal Place of Business			3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			st MOORE	CR2E083	(10/04)		
City & State			City & State				9P080-10	764	<u> </u>	plied For t Applicable	
Zip 	1	Country Zip		Cour	Country		e of Status Desired		5.00 Addi		
	6. Name	and Address of Curr	ent Registered Agent		Name	7. Name an	d Address of New	Registered A	gent		
150	SOUTH	THOMAS P PINE ISLAND RO	DAD	Street Address (P.O. Box Number is Not Acceptable)							
SUITE 540 PLANTATION FL 33324											
					City			FL	Zip Code	,	
	named entitions of regis		nt for the purpose of changi	ing its register	ed office or registe	red agent, or b	oth, in the State of F	lorida. I am fa	ımiliar with, a	and accept	
SIGNATURE .	Signature, typed	or printed name of registered a	gent and title if applicable	ed Agent signature require	d when rainstating)		DATE		}		
			[30307N 03.830 A A A A A A A A A A A A A A A A A A A	ayable to Fl	FEE IS \$50.00 orida Departina ay 1, 2005	. (XYYYYY > XXX)					
9.		MANAGING MEN	MBERS/MANAGERS	10.			ADDITIONS	CHANGES			
NAME STREET ADDRESS CITY-ST-ZIP	150 SOUT	I, THOMAS P IH PINE ISLAND ROA ION FL 33324	Delete	NAM STR	ė.				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:		□ Delete	NAN STR	- 1		,	-	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	Delete	NAA STR	E AE EET ADDRESS Y-ST-ZIP	-			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Deleta	NAM STR					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAM : STR	l l			-	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAM I STR City	ME IEET ADDRESS Y-ST-ZIP				☐ Change	Addition	
Indicated	i on this repo	ort is true and accurate	with this filing does not qua and that my signature shall istee empowered to execut	have the sam	ie legal effect as if i	made under oa	th; that I am a man	s. I further certi aging membe	fy that the in or manage	formation r of the	