2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003447

Entity Name: BIG SOLUTIONS, INC.

City-St-Zip:

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1761 WEST HILLSBORO BLVD SUNTRUST FINANCIAL CENTRE W., SUITE 409 DEERFIELD BEACH, FL 33442 **New Mailing Address: Current Mailing Address:** 1761 WEST HILLSBORO BLVD SUITE 409 DEERFIELD BEACH, FL 33442 US FEI Number: 65-0734340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROSENBERG, GLENN 3700 COCONÚT CREEK PARKWAY COCONUT CREEK, FL 33066 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RUBINO, CHRIS Name: Name: 3700 COCONUT CREEK PARKWAY Address: Address: City-St-Zip: COCONUT CREEK, FL 33066 City-St-Zip: Title: () Delete Title: () Change () Addition ROSENBERG, GLENN Name: Name: Address: 3700 COCONUT CREEK PARKWAY Address: City-St-Zip: COCONUT CREEK, FL 33066 City-St-Zip: Title: () Delete Title: () Change () Addition LEVY, NANCY Name: Name: 1167 HILLSBORO MILE STE 211 Address: Address: City-St-Zip: HILLSBORO BEACH, FL 33062 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: RUBINO, BELLE 363 CARDINAL AVENUE Address: Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33486 Title: () Delete Title: () Change (X) Addition TICKTIN, PETER Name: Name: PO BOX 811554 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

BOCA RATON, FL 33481

SIGNATURE: CHRIS RUBINO D 03/21/2006