FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 16, 2001 8:00 am DOCUMENT # P0000012212 **Secretary of State** BIGWHAT.COM, INC. 01-16-2001 90089 036 ***150 00 Principal Place of Business Mailing Address 501 VILLAGE GREEN, #19 501 VILLAGE GREEN. #19 001815 **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business 410 OLD MAIN STREET 3. Mailing Address 410 OLD MAIN STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State BRADENTON, RADENTON, FL 165-0983148 Not Applicable **\$8.75**-Additional -5. Certificate of Status Desired 34205 USA. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NAPOLITANO, JOHN E P.A. Street Address (P.O. Box Number is Not Acceptable) 677 NO. WASHINGTON BLVD., STE. 1A SARASOTA FL 34236 Zip Code 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition CR2E034 (10/00) ☐ Delete TITLE TITLE BIGELOW, ANDREW E NAME 410 OLD MAIN STREET NAME BIGELOW, ANDREW E STREET ADDRESS 501 VILLAGE GREEN, #19 STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Addition ☐ Change TITLE TITLE 🔀 Delete BIGELOW, CHRISTOPHER N NAME NAME STREET ADDRESS STREET ADDRESS 501 VILLAGE GREEN, #19 CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34209. ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.