2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000013430

Entity Name: BIG TOP KOOLERS, INC.

FILED May 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10 MONTEREY WAY 36 GOLF DRIVE

PORT ST. LUCIE, FL 34952 PORT ST. LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

36 GOLF DRIVE 10 MONTEREY WAY

PORT ST. LUCIE, FL 34952 PORT ST. LUCIE, FL 34952

FEI Number: 65-1074306 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:

BRIENZA, NICHOLAS C BRIENZA, NICHOLAS C 36 GOLF DRIVE 10 MONTEREY WAY

PORT SAINT LUCIE, FL 34952 US PORT SAINT LUCIE, FL 34952 US

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: 05/08/2007

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST () Delete Title: PDST (X) Change () Addition

BRIENZA, PATRICIA BRIENZA, PATRICIA Name: Name: 10 MONTEREY WAY 36 GOLF DRIVE Address: Address:

City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: PORT ST. LUCIE, FL 34952

Title: Title: (X) Change () Addition () Delete BRIENZA, NICHOLAS C Name: Name:

BRIENZA, NICHOLAS C 10 MONTEREY WAY Address: 36 GOLF DRIVE Address:

PORT ST. LUCIE, FL 34952 PORT ST. LUCIE, FL 34952 City-St-Zip: 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: NICHOLAS C. BRIENZA 05/08/2007 ٧