

2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 01, 2002 8:00 am
Secretary of State

02-13-2002 90167 046 ***150.00

DOCUMENT # P01000057473
 1. Entity Name
BIG CAT INVESTMENTS, INC.

Principal Place of Business 98 GEORGE ELLIS POINT FREEPORT FL 32439	Mailing Address 98 GEORGE ELLIS POINT FREEPORT FL 32439
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3735778	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

PERRY, AMY A
4477 LEGENDARY DR STE 202
DESTIN FL 32541

7. Name and Address of New Registered Agent

Name: **Mikel L Perry**
 Street Address (P.O. Box Number is Not Acceptable): **98 George Ellis Point**
Freeport, FL 32439
 City: **FL** 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: *Mikel L Perry* DATE: 3-12-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE: D NAME: PERRY, MIKEL L STREET ADDRESS: 98 GEORGE ELLIS POINT CITY-ST-ZIP: FREEPORT FL 32439	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Mikel L Perry* **REQUIRED** DATE: 1-23-02 (850) 835-3200
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/01)