

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000050744

Entity Name: BIG SAVINGS, INC.

FILED  
Oct 13, 2005  
Secretary of State

## Current Principal Place of Business:

5395 W. IRLO BRONSON MEMORIAL HWY  
KISSIMMEE, FL 34746

## New Principal Place of Business:

3501 WEST VINE STREET  
269  
KISSIMMEE, FL 34741

## Current Mailing Address:

5395 W. IRLO BRONSON MEMORIAL HWY  
KISSIMMEE, FL 34746

## New Mailing Address:

3501 WEST VINE STREET  
269  
KISSIMMEE, FL 34741

FEI Number: 02-0595804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALAZAR, IVAN A  
9763 S. ORANGE BLOSSOM TRL  
210  
ORLANDO, FL 32837 US

## Name and Address of New Registered Agent:

GONZALEZ, LUIS O  
611 GRAND RESERVE DRIVE  
DAVENPORT, FL 33837 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: LUIS O. GONZALEZ

10/13/2005

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:

Title: PD ( ) Delete  
Name: GONZALEZ, LUIS O  
Address: 5395 W. IRLO BRONSON MEMORIAL HWY  
City-St-Zip: KISSIMMEE, FL 34746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GONZALEZ, LUIS O  
Address: 611 GRAND RESERVE DRIVE  
City-St-Zip: DAVENPORT, FL 33837

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUIS O. GONZALEZ

PD

10/13/2005

Electronic Signature of Signing Officer or Director

Date