2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2005 8:00 am Secretary of State 05-04-2005 90160 032 ***150.00

DOCUMENT # P02000078991 1. Entity Name BIGWORLD PRODUCTIONS, INC.						05-04-2005 90160 032 ***150.00				
Principal Place of Business Mailing Address										
		312 MIDWAY ISLAND CLEARWATER, FL 3376	312 MIDWAY ISLAND CLEARWATER, FL 33767							
Principal Place of Business 3. Maifing Address										
2. Finding Address						4 4 1 1 1 1 1	O MERI WIND ESTABLISM	KUN HARRAN CUNHAHA E	(A) #20 1 10 A)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			6 Chg-P	CR2E0	34 (10/03)	ı	
City & State		City & State	City & State		4. FEI Nur 59-3	nber 710978		 	pplied For ot Applicable	
Zip	Country	Zip	Count	ry	5. Certific	ate of Status Desire	×	S8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent			7. Name a	and Address of Ne	w Registered A	gent		
KINDER, DEBORAH L				Name	·					
312 MIDWAY ISLAND CLEARWATER, FL 33767				Street Address (P.O. Box Number is Not Acceptable)						
			1	City				7 700 000	<u> </u>	
			1			FL Zip Code				
 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. Lam familiar with, and accept the obligations of registered agent. 										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOWIII FEE to \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					\$5.00 May Be Added to Fees					
10.	OFFICERS AND		11.			IS/CHANGES TO C				
TITILE NAME	C. Degle		MAME		P Kinder, De	borah L		Change	Addition	
STREET ADDRESS				T ADORESS	BIZ Midwa	midway Island				
CiTY-ST-ZEP			CITY-	ST-ZIP	Clearwat	arwater, FL 33767				
title Name		☐ Delete	TITLE					☐ Change	Addition	
STREET ADDRESS			STREE	T ADDRESS						
CITY-ST-ZIP			CITY-S	ST-ZEP			···			
TITLE NAME		☐ Delete	TITLE	- 1				Change	Addition	
STREET ADDRESS City-St-Zip			1	T ADDRESS						
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STREET ADORESS			NAME	ADDRESS						
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TITLE		C Delete	ITILE					Change	Addition	
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TITLE		☐ Oelete	TITLE					Change	☐ Addition	
NAME STREET ADORESS			NAME Street	ADORESS						
CITY-ST-ZIP			CITY-S	1					}	
12 I heroby c	artify that the information complied with a	this filling door ant assetti. In a			4 - 0- 4 440 034					

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE.

Debrahd Kendy

4/29/05 (727)466-9762