2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 24, 2006 8:00 am Secretary of State

07-24-2006 90008 030 ***150.00

	ANNUAL	KEPUKI	
DOCUMENT #	P020000789	991	

1. Entity Name **BIGWORLD PRODUCTIONS, INC.** Principal Place of Business Mailing Address 312 MIDWAY ISLAND 312 MIDWAY ISLAND CLEARWATER, FL 33767 CLEARWATER, FL 33767 2. Principal Place of Business 3. Mailing Address 16415 6415 Bridgewalk Bridge Walk Do Suite, Apt. #, etc. Sulte, Apt. #, etc. 05032006 Cha-P CR2E034 (11/05) Suite Suite L City & State 4. FEI Number Applied For City & State 59-3710978 Not Applicab Country Ζp Country \$8.75 Additional 5. Certificate of Status Desired 33547 S Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KINDER, DEBORAH L 16415 Bridge walk Dr Street Address (P.O. Box Number is Not Acceptable) 312 MIDWAY ISLAND CLEARWATER, FL 33767 Lithia, FL 33547 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. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE 24-Change ☐ Additio ☐ Delete President Kinder, Deborah KINDER, DEBORAH L NAME NAME STREET ADDRESS 312 MIDWAY ISLAND STREET ADDRESS 16415 Bridgewalk Dr. CITY-ST-ZIP CLEARWATER BEACH, FL 33767 CITY-ST-ZIP 33547 TITLE ☐ Delete TITLE ☐ Change ☐ Additic NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Additic TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Additio NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Additit ☐ Delete ΠΠF TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P

Deboral L. Kinder, Pres

6/24/06

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in the production of the corporation of 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 in the production of 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 in the production of the receiver or trustee.