2005 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF

Apr 14, 2005 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P03000015554** 1. Entity Name DANNY BIGGS LTD., INC. Mailing Address Principal Place of Business_ 116 CLEVELAND RD. 116 CLEVELAND RD. LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 No Chg-P 01172005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0159184 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent **DO NOT WRITE** BIGGS, DANIEL E 116 CLEVELAND RD. LAKE WORTH, FL 33467 IN THIS SPACE 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE BIGGS, DANIEL E NAME STREET ADDRESS 116 CLEVELAND RD. U00U00304107 CITY - ST - ZIP LAKE WORTH, FL 33467 ′14/05-80029-01**9** 150**.0**0 TITLE BIGGS, REGINA A NAME STREET ADDRESS 116 CLEVELAND RD. LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 or an attachment with an address, with all other like empowered.

OR DIRECTOR

FILED