2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017338

Entity Name: BIG YELLOW ENTERPRISES, INC.

US

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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17512 FLORAL ESTATE DR. 17518 FLORAL ESTATE DR. ODESSA, FL 33556 ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

P.O. BOX 638 ODESSA, FL 33556

FEI Number: 14-1873289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHIARITO, CHRISTINE CHIARITO, CHRISTINE M 17518 FLORAL ESTATE DR 17518 FLORAL ESTATE DR ODESSA, FL 33556 ODESSA, FL 33556

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: CHRISTINE CHIARITO 04/21/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: **PRFS** (X) Change () Addition CHIARITO, DANIEL C CHIARITO, CHRISTINE M Name: Name: 17512 FLORAL ESTATE DR 17518 FLORAL ESTATE DRIVE Address: Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: ODESSA, FL 33556 US

Title: () Delete Title: V.P. () Change (X) Addition CHIARITO, DANIEL C Name: Name:

17512 FLORAL ESTATE DRIVE Address: Address:

ODESSA, FL 33556 City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete SEC

Name: BIVONA, NANCY Name:

17511 FLORAL ESTATE DRIVE Address: Address:

City-St-Zip: City-St-Zip: ODESSA, FL 33556

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: CHRISTINE CHIARITO **PRES** 04/21/2005