FILED 2007 FOR PROFIT CORPORATION Apr 04, 2007 08:00 Al Secretary of State **ANNUAL REPORT** DOCUMENT # P04000077133 DREAM BIG INVESTMENTS, INC Principal Place of Business Mailing Address 12428 SAN JOSE BLVD 12428 SAN JOSE BLVD STE 4 JACKSONVILLE, FL 32223 STE 4 JACKSONVILLE, FL 32223 US 03082007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 90-0181448 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RYAN, WILLIAM J DO NOT WRITE 12428 SAN JOSE BLVD STE 4 JACKSONVILLE, FL 32223 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. 4-207 (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 U00000690670 Trust Fund Contribution. Added to Fees 04/11/07-80086-008 150.00 OFFICERS AND DIRECTORS 10. TITLE RYAN, WILLIAM J NAME 12428 SAN JOSE BLVD STE F STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32223 TITLE NAME STREET ADDRESS CITY-ST-ZIP 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

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME O

IGNING OFFICER OR DIRECTOR

4-2-07

904) 260-0000

Daytime Phone #