## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000046463

Entity Name: BIG FISH GROUP CORPORATION

**FILED** Mar 06, 2008 Secretary of State

Durrent Principal Place of Business: New Principal Place of Busines	t Principal Place of Business:	New Principal Place of Busines
---	--------------------------------	--------------------------------

1101 BRICKELL AVENUE NORTH TOWER SUITE 1102

MIAMI, FL 33131

**New Mailing Address:** 

NORTH MIAMI, FL 33178

1986 NE 148TH ST

1101 BRICKELL AVENUE NORTH TOWER SUITE 1102

MIAMI, FL 33131

**Current Mailing Address:** 

1986 NE 148TH ST NORTH MIAMI, FL 33178

FEI Number: 20-8865697

FEI Number Applied For ( )

FEI Number Not Applicable ( )

DIAZ, ARIEL

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DIAZ, ARIEL 1101 BRICKELL AVENUE NORTH TOWER SUITE 1102

MIAMI, FL 33131 US

1986 NE 148TH ST

NORTH MIAMI, FL 33178 US

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:

03/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete

ARESTIN, JOSE F Name:

1101 BRICKELL AVENUE, NORTH TOWER #1102 Address:

City-St-Zip: MIAMI, FL 33131 US

Title: VΡ (X) Delete

CALZAVARA DE ARAÚJO, GABRIEL Name: Address:

MIAMI, FL 33131 City-St-Zip:

1101 BRICKELL AVENUE, NORTH TOWER #1102

(X) Delete Title: S/T

PASSADORE, MANUEL Name: 1101 BRICKELL AVENUE, NORTH TOWER #1102 Address:

City-St-Zip: MIAMI, FL 33131 Title: (X) Change ( ) Addition

PASSADORE, MANUEL Name: Address: 1986 NE 148TH ST

City-St-Zip: NORTH MIAMI, FL 33178 US

Title: () Change () Addition Name:

Address: City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Ρ SIGNATURE: MANUEL PASSADORE 03/06/2008