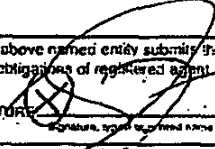
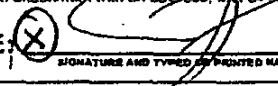


FILED
Jul 02, 2008 8:00 am
Secretary of State

06-04-2008 90003 007 ***150.00

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P07000098185			
1. Entity Name BIG DOG BUSINESS VENTURES WORLDWIDE, INC.			
Principal Place of Business 8013 NW 70TH AVE PARKLAND, FL 33067		Mailing Address 8013 NW 70TH AVE PARKLAND, FL 33067	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 87-0811576		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 33311-4132		7. Name and Address of New Registered Agent Name Philip ROSE Street Address (P.O. Box Number is Not Acceptable): 8013 NW 70th AVE City Parkland FL Zip Code 33067	
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  (NOTE: Registered Agent signature required when reflecting) Signature, print or typed name of registered agent and title if applicable. DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	0 ROSE, PHILIP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ROSE, PHILIP	NAME	
STREET ADDRESS	8013 NW 70TH AVE	STREET ADDRESS	
CITY - ST - ZIP	PARKLAND, FL 33067	CITY - ST - ZIP	
TITLE	D ROSE, EMMA ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ROSE, EMMA	NAME	
STREET ADDRESS	8013 NW 70TH AVE	STREET ADDRESS	
CITY - ST - ZIP	PARKLAND, FL 33067	CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
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 		4/28/08	
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR		Daytime Phone #	