

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102914

Entity Name: BIG M SOLUTIONS, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

22251 SW 187TH AVENUE  
GOULDS, FL 33170

## New Principal Place of Business:

## Current Mailing Address:

22251 SW 187TH AVENUE  
GOULDS, FL 33170

## New Mailing Address:

FEI Number: 26-1081188

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAUM, JOHN A CPA  
10512 S.W. 137TH PLACE  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

ROLLINS, RICHARD T CPA  
22251 SW 187 AVENUE  
GOULDS, FL 33170 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: RICHARD T. ROLLINS

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MARTINEZ, MARGARITO V  
Address: 22251 SW 187TH AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: D ( ) Delete  
Name: MARTINEZ, MARIA O  
Address: 22251 SW 187TH AVENUE  
City-St-Zip: GOULDS, FL 33170

Title: D ( ) Delete  
Name: MARTINEZ, DOLORES  
Address: 22251 SW 187TH AVENUE  
City-St-Zip: GOULDS, FL 33170

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: DOLORES MARTINEZ

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date