2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000073085

Entity Name: BIG SUBS, INC

FILED Nov 16, 2009 Secretary of State

-		,			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	MEADOWS RO	AD			
SUITE 9 JACKSON	VILLE, FL 322 ⁻	17 46			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	MEADOWS RO	AD			
SUITE 9 JACKSON	VILLE, FL 322 ⁻	17 46			
FEI Number:	26-3127974	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agen	t: Name and Address o	e and Address of New Registered Agent:	
	NANCY R EWOOD AVE S VILLE, FL 3220				
	named entity s e of Florida.	ubmits this statement for	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE: NANCY R	BARBER			
	Electroni	c Signature of Registered	l Agent	Date	
		(2)(b), F.S., the corporation of Trust Fund Contribution ().	lid not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BARBER, NANC 1294 EDGEWOO JACKSONVILLE	DD AVE S	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BARBER, DYLAI 1294 EDGEWOO JACKSONVILLE	DD AVE S	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NANCY R BARBER Ρ 11/16/2009