## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** 



	RPORATION DAL REPORT 1996	Sec	dra B. Mortha relary of Stat OF CORPOR	e			
. Corporation	TREATIO	000015524 (	(0)				
BIG M	IIDGET OF OCALA, INC.				4 ) 13 JUNE 1 113 18 13 JUNE 1 18 18 18 18 18 18 18 18 18 18 18 18 1	III AARK AANAI RIGAT ARIAT A	
'rincipa' Place		Mailing Address				isi adira Barat ISBBI Britis Bi	)
1107 NW 10 OCALA FL 3		1107 NW 10TH STE OCALA FL 34475	REET				
					3. Date Incorporated or Qualified 03/02/1993	3a. Date of Last F 03/21/19	
. Principal Pla }	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
l Suite, Apt. ≢	#, etc.	<b>26</b>			59-3169401	\$8.7	Not Applicable  5 Additional
		27			5. Certificate of Status Desired		Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	L J Adde	00 May Be ed to Fees
Z	Country 25  9. Name and Address of Cur	Zip 29 rent Registered Agent	30 Cou	ritry 	This corporation has liability for Florida Statutes     Name and Address of New Florida Statutes	i ∐No	199.032,
				81 Name			*
	SUNIL C			82 Street Ad	dress (P.O. Box Number is Not Acceptat	ole)	
	W 10TH STREET FL 34475			83			
COADI	16 01170						
				84 Cit.		Tabl 3	
. Pursuant to	o the provisions of Sections 607.09	502 and 607.1508, Florida Stat	utes, the abo	84 City ve-named corp	oration submits this statement for the pu		ip Code registered office
gnature.	Signature, typed or printed name of registered a			ve-named corp orporation's bo	oration submits this statement for the puard of directors. Thereby accept the application for the public statement for the purification of the public statement for the public state	rpose of changing its ointment as registered	registered office d agent. I am
GNATURE.	Sgravore, typed or primating neighbored a OFFICERS A	gent and title if applicable (	NOTE Registered	ve-named corp orporation's bo Approximate rep	and when new statings	rpose of changing its ointment as registered	registered office d agent. I am
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F F F F F F F F F F F F F F F F F F F	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST	gret and title if apparation (	13. 1 1 1 1 1 1 2 N/ 1.3 SI	Vernamed corporation's bo	and when new statings	pose of changing its contributed as registered DATE.	registered office diagent. I am DRS IN 12
NATURE.	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S	uset and title if agriculation is a  AND DIRECTORS  DELETE	13. 1 VII 12 NV 1.3 SI 1.4 Cr 2.1 Tr 2.2 NA	Agent syntage requirements by the syntage requirements by	and when new statings	DATE  Change	registered office diagent, I am DESSIN 12
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F FET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S	uset and title if agriculation is a  AND DIRECTORS  DELETE	13. 1 1 11 1 2 N/ 1 3 SI 1 4 C 2 1 T 2 2 N/ 2 3 SI	Apper signature reported for the signature repor	and when new statings	DATE  Change	régistered office d'agent. I am DES IN 12
F ET ADDRESS - ST-ZIP ET ADDRESS - ST-ZIP	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S 1107 NW 10TH STREET	Queet and tale if approvator	13. 1 1 11 1 2 N/ 1 3 SI 1 4 C- 2 1 T' 2 N/ 2 3 SI 2 4 CI	Apper signature requirements for the ME REEL ADDRESS IY-S1-ZIP REEL ADDRESS IY-S1-ZIP REEL ADDRESS IY-S1-ZIP	and when new statings	DATE  Change	registered office d agent. I am  ORS IN 12  Addition  Addition
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FET ADDRESS - ST-ZIP	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S 1107 NW 10TH STREET	Queet and talle if approvative	13. 1 1 TI 1 2 NA 1 3 SI 1 4 GC 2 1 TI 2 2 NA 2 3 SI 2 4 CI 3 1 TI 3 2 NA 3 3 SI 3 4 CI	Apper some report of the sound	and when new statings	DATE  Change  Change	registered office diagent. Lam  ORS: IN 12  Addition  Addition
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EFT ADDRESS - ST-ZIP - FFT ADDRESS	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S 1107 NW 10TH STREET	Queet and talle if approvative	13. 1 1 1 1 1 2 N/ 1 3 SI 1 4 C/ 2 1 1 1 2 2 N/ 2 3 SI 2 4 C/ 3 1 TI 3 2 N/ 3 3 SI 3 4 C/ 4 1 II 4 2 N/	Apper some or requirement of the metal address (Y-SI-ZIP) TLE ME HEEL ADDRESS	and when new statings	DATE  Change  Change	registered office diagent. Lam  ORS: IN 12  Addition  Addition
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GNATUFRE.  F  MF  MF  MF  MF  MF  MF  MF  MF  MF	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S 1107 NW 10TH STREET	Queet and talle if approvative	13. 1 1 1 12 N/ 13 SI 1 4 C/ 2 1 T/ 2 2 N/ 2 3 SI 2 4 C/ 3 1 TI 3 2 N/ 3 3 SC/ 4 1 TI 4 2 N/ 4 3 ST	Apper species reported for portation's better the portation's better the portation's better the portation's better the portation of the portat	and when new statings	DATE  Change  Change	registered office diagent. Lam  ORS: IN 12  Addition  Addition
GNATUFRE.  F.  JEFT ADDRESS  Y-ST-ZIP  F  JEFT ADDRESS  Y-ST-ZIP  F  JEFT ADDRESS  (-ST-ZIP  F  JEFT ADDRESS  (-ST-ZIP  F  JEFT ADDRESS  (-ST-ZIP  F  JEFT ADDRESS  JEFT ADDRESS  JEFT ADDRESS  JEFT ADDRESS  JEFT ADDRESS	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S 1107 NW 10TH STREET	AND DIFFE CTORS  DELETE  DELETE  DELETE	13. 1 11 12 N/ 13 SI 1 4 C/ 2 1T 22 N/ 2 3 SI 2 4 C/ 3 1 TI 32 N/ 33 SI 34 C/ 4.1 TI 42 N/ 43 ST 44 CI 51 TI 52 N/	Apper some of corporation's bo  Apper some of corporation's bo  TLE  ME REEL ADDRESS IY-SI-ZIP  ILE  ME REEL ADDRESS Y-SI-ZIP  ILE  ME REEL ADDRESS Y-SI-ZIP  ILE  ME REEL ADDRESS Y-SI-ZIP  ILE  ME ME REEL ADDRESS Y-SI-ZIP  ILE  ME M	and when new statings	DATE  Change  Change	registered office diagent. Lam  DRS: IN 12 Addition Addition Addition
GNATURE.  SET ADDRESS  Y-ST-ZIP  F  AE  EFT ADDRESS  Y-ST-ZIP  F  AE  EFT ADDRESS  (-ST-ZIP  F  AE  EFT ADDRESS  (-ST-ZIP  F  AE  EET ADDRESS	PD PATEL, SUNIL C 1107 NW 10TH STREET OCALA FL 34475 ST PATEL, JAYMINI S 1107 NW 10TH STREET	AND DIFFE CTORS  DELETE  DELETE  DELETE	13. 1 1 1 1 1 1 2 N/ 1 3 SI 1 4 C/ 2 1 T/ 2 2 N/ 2 3 SI 2 4 C C C C C C C C C C C C C C C C C C	Approximated corporation's bo  Approximated corporation's bo  TLE  ME  HEEL ADDRESS  IY-SI-ZIP  ILE  ME  REFL ADDRESS  Y-SI-ZIP  ILE  ME  REFL ADDRESS	and when new statings	DATE  Change  Change	registered office diagent. Lam  DRS: IN 12 Addition Addition Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further certify that the information indicated on this annual report or supplemental annual 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 directly of the copporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, by on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96 352629-4837