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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # P94000092972

1. Corporation Name
BIG B ENTERPRISES, INC.



Principal Place of Business Mailing Address
 4390 HALIFAX DRIVE 4390 HALIFAX DRIVE
 PORT ORANGE FL 32127 PORT ORANGE FL 32127

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/22/1994	
21		26		4. FEI Number 59-3287317	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip Country		Zip Country			
24		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PREWITT, BENJAMIN D 4390 HALIFAX DRIVE PORT ORANGE FL 32127				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PREWITT, BENJAMIN D		1.2 NAME				
STREET ADDRESS	4390 HALIFAX DRIVE		1.3 STREET ADDRESS				
CITY-ST-ZIP	PORT ORANGE FL		1.4 CITY-ST-ZIP				
TITLE	STD	<input type="checkbox"/> DELETE	2.1 TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PREWITT, JEWELL		2.2 NAME				
STREET ADDRESS	4390 HALIFAX DRIVE		2.3 STREET ADDRESS				
CITY-ST-ZIP	PORT ORANGE FL		2.4 CITY-ST-ZIP				
TITLE	V	<input type="checkbox"/> DELETE	3.1 TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DAVIS, HAROLD J		3.2 NAME				
STREET ADDRESS	4064 HALIFAX DR SUITE 16		3.3 STREET ADDRESS				
CITY-ST-ZIP	PORT ORANGE FL 32127		3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **BENJAMIN D PREWITT** **PRESIDENT** **2/15/99**

Benjamin D. Prewitt *President* Date **3-29-99** Daytime Phone #

CR2E034 (1/198)