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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000052346 (0)

DOCUMENT #
1. Corporation Name

BIG BOY SPORTS, INC.

Principal Place of Business

Mailing Address



4240 NW 193RD STREET BAY F MIAMI FL 33054	4240 NW 133RD STI Miami Fl 33054	REET BAY F		
			3. Date Incorporated or Qualified 07/03/1995	3a. Date of Last Report
2. Principal Place of Business 21 4240 N.W. 133 RD ST. BAY	2a. Mailing Address		4. FÉI Number (05-0598294	Applied For
21 7270 N.W. 133 RD 31. * #	T   26		45:05/02/9	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  23 MIAMI FL	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Zip	Country	8. This corporation has liability for i	
24 33059 25	29	30	Florida Statutes 🗖 Yes	□No
9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New R	egistered Agent
		81 Name		į
PLASENCIA, RAYMOND A		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
8978 NW 152ND LANE				
MIAMI FL 33016		83		
		84 City		FL 85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Florid familiar with, and accept the obligations of, Section</li> </ol>	da. Such change was authoriz	zed by the corporation's boa	oration submits this statement for the pur and of directors. I hereby accept the appo	pose of changing its registered office bintment as registered agent. I am
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable. (NO	OTE: Registered Agent signature requir	ed when reinstaling)	DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	Change Addition
TITLE PD	☐ DELETE	1. 1 TITLE		Change Addition
NAME PLASENCIA, RAYMOND A		1.2 NAME		[7]
STREET ADDRESS 8978 NW 152ND LANE		1.3 STREET ADDRESS		اً ا
CITY-ST-ZIP MIAMI FL 33016		1.4 CITY-ST-ZIP		{
TITLE STO	DELETE	2. 1 TITLE		Change Addition
NAME PLASENCIA, RAYNIER	•	2.2 NAME		
STREET ADDRESS 8416 NW 201ST TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL 33015		2 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3 1 TITLE .		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3, STREET ADDRESS		
CITY-ST-ZIP	D or cre	3 4 CITY - ST - ZIP		Change El Addition
TITLE	☐ DELETE	4. 1 TITLE		Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	4.4 CITY-ST-ZIP 5 1 TITLE		Change Addition
NAME	□ beccie	5 2 NAME		LI STATES LI FROMUNT
		53 STREET ADDRESS		6
STREET ADDRESS		54 CITY-ST-ZIP		<u> </u>
CITY-ST-ZIP TITLE	☐ DELETE	6 1 IITLE	80000179 -03/21/96010	Change Addition
NAME		621AME	-03/21/96010	82ADI ,
STREET ADDRESS		6.3 STREET ADDRESS	***200,00	31.
City-St-ZiP		64 - TY - ST - ZIP		38
14. I do hereby certify that the information supplied	with this filing is voluntarily fur	nished an loes not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Statutes. I further
certify that the information indicated on this annu- oath; that I am an officer or director of the corpo appears in Block 12 or Block 13 I dianged, or o	ual report or supplemental ann	nual report: true and accur	rate and that my signature shall have the nis report as required by Chapter 607, Fk	
SIGNATURE: ~	MILLERA	•	ml27196	(30<) 169 9077
SIGNATURE SIGNATURE AND TYPED OF	R PRINTED NAME OF SIGNING OFFIC	ER OR DIRECTOR	Date	Daytime Prione #

NG OFFICER OR DIRECTOR