FILE NOW; FILING FEE AFTER MAY 1 IS $550.00

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

16

DOCUMENT # P95000061973

1. Corporation Name

Big House Corp., a Florida corporation

Principal Place of Business	Mailing Address
189 Edgewater Dr. Coral Gables, FL 33133	189 Edgewater Dr. Coral Gables, FL 33133

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 09/11/95
3a. Date of Last Report:
4. FEI Number: 65-0740491 ☑ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Mark A. Mardor
9100 S. Dadeland Blvd.
One Datran Center, Ste. 1001
Miami, FL 33156.

10. Name and Address of New Registered Agent

81 Name: Sofia Powell-Cosio, P.A.
82 Street Address (P.O. Box Number is Not Acceptable): 1390 Brickell Ave.
83: Suite 200
84 City: Miami **FL** 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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: Sofia Powell-Cosio — 4/18/97
(Signature, type or printed name of person signing and title if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P.T.D	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	Edgardo Daniel Perreyra		12 NAME		
STREET ADDRESS	189 Edgewater Dr.		13 STREET ADDRESS		
CITY-ST-ZIP	Coral Gables, FL 33133		14 CITY-ST-ZIP		
TITLE	V.S.D	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	Miriam P. Perreyra		22 NAME		
STREET ADDRESS	189 Edgewater Dr.		23 STREET ADDRESS		
CITY-ST-ZIP	Coral Gables, FL 33133		24 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

DW 5-8-97

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CR2E034 (9/96)

14. I do 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.

SIGNATURE: 4/18/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date