FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000074140 (1)

BIG BOY MARKET, INC.

FILED Feb 23 1998 8:00am Secretary of State



Principal Place		Mailing Address			EELH BUNY 1884 STOU HUN BUN BUN 1884
749 WESTMORELAND DRIVE ORLANDO FL 32805		749 WESTMORELAND DRIVE ORLANDO FL 32805		DO NOT WE!	TE IN THIS SPACE
Ì				3. Date Incorporated or Qualified	
				09/25/1995	
2. Principal Pi	lace of Business	2a. Mailing Address	7	4 FELNumber	Applied For
21		26 5281 W.	Irlo Bronson	He/_59-3338090	Not Applicable
Suite, Apt.	#. etc.	Suite, Apl. #, etc.	- 110 - 101-1-1011	1.7	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	0	City & State	- 1	6. Election Campaign Financing	\$5.00 May Be
23		28 KISSIMME	<u>۲۱ می</u>	Trust Fund Contribution	Added to Fees
Zip	Country		Country	8. This corporation owes or has I	
24	25 9. Name and Address of Curr		90 (/S	Personal Property Tax due Jui 10. Name and Address of New F	
		ielli negisteret Agera	81 Name	10, Haine and Address of New F	iodistaten Manit
	LEIMAN, RAMI				
749 WESTMORELAND DRIVE			82 Street Add	ress (P.O. Box Number is Not Accept	able)
UN	LANDO FL 32805		83		
			84 City		FI 85 Zip Code
44 Purcuant	to the provisions of Sections (607)	5.02 and 607 1508 Florida Statuto	the above-named corr	poration submits this statement for the	
office or r	egistered agent, or both, in the St	ate of Florida Such change was au	thorized by the corpora	poration submits this statement for the tion's board of directors. I hereby acc	ept the appointment as registered
	(2)		da Statutes.		0 11 00
SIGNATURE	Signature bond or other harm of trusting	agrical and take of applies date. (NOTE	Registered Agent signature requi	red when reinstating)	2-11-98
12.		AND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	SOLOMAN, RAMI K		1.2 NAME		
STREET ADORESS	749 S WESTMORELAND DI	२	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32805		1.4 CITY-ST-ZIP		
TITLE		DELETE	2 1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			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			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		j
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		į
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		

14. Thereby 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