SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **P95000096165 (2)**

1. Corporation Name
THE BIG APPLE CORP.

Principal Place of Business
690 S.W. 18TH STREET
BOCA RATON FL 33486

Mailing Address
690 S.W. 18TH STREET
BOCA RATON FL 33486

3. Date Incorporated or Qualified: **12/20/1995**
3a. Date of Last Report:

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 (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 65-0651451 — 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
CERASUOLO, RON
690 S.W. 18TH STREET
BOCA RATON FL 33486

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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 of Registered Agent (required if agent is not officer or director) (NOTE: Registered Agent cannot be changed after filing change) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	CERASUOLO, RON	
STREET ADDRESS	690 S.W. 18TH STREET	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	Cerasuolo, Ron	
1.3 STREET ADDRESS	690 SW. 18th Street	
1.4 CITY-ST-ZIP	Boca Raton FL 33486	
2.1 TITLE	VP	☐ Change ☒ Addition
2.2 NAME	Nittolo, Robert F	
2.3 STREET ADDRESS	22424 SW 66th Ave #412	
2.4 CITY-ST-ZIP	Boca Raton FL 33428	
3.1 TITLE	S	☐ Change ☒ Addition
3.2 NAME	Boger, Adrienne	
3.3 STREET ADDRESS	690 SW 18th Street	
3.4 CITY-ST-ZIP	Boca Raton FL 33486	
4.1 TITLE	T	☐ Change ☒ Addition
4.2 NAME	Allen, David B	
4.3 STREET ADDRESS	5037 NW 11th WAY	
4.4 CITY-ST-ZIP	Pompano Beach FL 33064	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 6/20/96 1-407-338-3035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/96)