PROFIT CORPORATION ANNUAL REPORT

1999

Corporation Name



DOCUMENT # P95000096165

FLORIDA DEPARTMENT OF STATE

Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90160 025 ***150.00

THE BIG APPLE CORP.							
Principal P ace of Business	Mailing Address						
890 S.W. 18TH STREET BOCA RATON FL 33486	690 S.W. 18TH STREET BOCA RATON FL 3348		DO NOT WRITE IN THIS SPACE				
			3. Date Incorporated or Qualifed				
			12/20/1995				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For			
11 ·	26		65-0651451	Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country	Zip 29	Country 30	This corporation owes the current year Personal Property Tax.	Intangible Yes No			
P. Name and Address of Ci			10. Name and Address of New Registered Agent				

CERASUOLO, RON 690 S.W. 18TH STREET **BOCA RATON FL 33486**

	10, Marie and Fizzares er Hear He greater - 1 19-111
81	Name
82	Street Address (P.O. Bo): 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.

SIGNATUF:E								
	Signature, typed or printed name of registered agen:		tegistered Agent signature req iii			DATE	UD DIDECTO	20 IN 42
12. OFFICERS ANI) DIRECTORS			13.	ADDITI	DNS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME	CERASUOLO, RON		1.2 NAME					
STREET ADDRESS	690 S.W. 18TH STREET		1.3 STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33486		1.4 CITY-ST-ZIP					
TITLE	VP	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	POPESCU, ENRICO		2.2 NAME					
STREET ADDRESS	913 DIPLOMAT PARKWAY		2.3 STREET ADDRESS					
CITY-ST-ZIP	HALLANDALE FL 33009		2. 4 CITY-ST-ZIP					
TITLE	S	☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	BOGER, ADRIENNE		3.2 NAME					
STREET ADDRESS	690 SW 18TH STREET		3 3 STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33486		34 CITY-ST-ZIP					
TITLE	T	⊠ DELETE	4.1 TITLE				Change	☐ Addition
NAME	ALLEN, DAVID B		4. 2 NAME					
STREET ADDRESS	3521 WEST HILLSBORO BLVD.		4.3 STREET ADDRESS					
CITY-ST-ZIP	COCONUT CREEK FL 33073		4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			52 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			63 STREET ADDRESS					
CITY-ST-7IP			6.4 CITY-ST-ZIP					

14. I herety certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0; (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 emplowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, or or an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561.416.3003

Daytime Phone #