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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000057795 (2)

BIG GRE		of Florida	, INC.		•						I ga nil bo il)	
Principal Place of Business Mailing Address														
3925 WEST KENNEDY BLVD. TAMPA FL 33609 TAMPA FL 33609-2721														
,										Date Incorporated or Q 07/08/1996	ualified	3a. [Date of Last F	Report
2. Principal Place of Business				26. Mailing Address					4,	FEI Number 59 - 3389	913		- +	pplied For
Suite, Apt #, etc				Suite, Apt. #, etc.					5.	Certificate of Status De			\$8.75	ot Applicable Additional equired
City & State				City & State				Election Campaign Financing \$5.00 May Be						
23				28						Trust Fund Contribution				to Fees
Zip 24	Country 25			Zip		Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes No					
[24]		and Address of				, j		, , , , , , , , , , , , , , , , , , , 		Name and Address of				
BED	DOW, RICH	ARD R				61	T	lame						
3925 WEST KENNEDY BLVD.				1			S	treet Addre	dress (P.O. Box Number is Not Acceptable)					
TAMPA FL 33609				<u>.</u>			 						······································	
						84	84 City			·			85 Zip	Code
								•						
1	to the provision registered age im familiar with	ons of Sections 6 ent, or both, in the h, and accept the	07.0502 and e State of Fli e obligations	d 607,1508, Flo orida Such cha s of, Section 60	rida Statutes ange was au 7.0505, Flori	s, the abov ithorized b ida Statute	/e-r\ y th es.	amed corpo e corporati	oration ion's b	submits this statement oard of directors. I here	for the p by accer	ourpose of the ap	of changing ippointment as	its registered s registered
SIGNATURE	Signature, typed o	or printed name of regis	lered agent and	tile i applicable.	(NOTE	Registered Ag	eni s	ignature require	ed when	reinstating}		DATE		
12.		OFFICE	RS AND DIF			13.			Α	DDITIONS/CHANGES 1	O OFFIC	ERS AN	****	
THILE	PEDDOM	RICHARD R		اليا	DELETE	1.1 TITLE							Change	Addition
NAME STREET ADDRESS		T KENNEDY B	I VD.			1,2 NAME 1,3 STREE		DE CC						
CITY ST. ZIP	TAMPA FL					1.4 CHY-		ł						
TITLE	S				DELETE	2.1 TITLE	<u></u>			***************************************		***************************************	Change	Addition
NAME		CAMITA P				2.2 NAME								
STREET ADORESS	3925 WES	T KENNEDY B	LVD.			2.3 STREE		1						
CHY-ST-ZIP TiTLE	V	. 33008		П	DELETE	2.4 City - 31 Title		IP					Change	Addition
NAME	BEDDOW,	SCOTT A			•	32 NAME		Ì						
STREET ADDRESS	3925 WES	T KENNEDY B	LVD.			3.3 STREE	KIA T	DRESS						
CITY-SI-7IP	TAMPA FL	. 33609				3.4 CITY-	S1-2	IP .		·			peril	
THE				الا	DELETE	4.1 TITLE	_						Change	Addition Addition
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CITY-ST-ZIP	}					4.4 CITY-		j			-			
TITLE	<u> </u>				DELETE	5.1 TITLE		-					Change	Addition
NAME]					5.2 NAME								
STREET ADDRESS	1					5.3 STREE	T ADO	ORESS						
City - St - Zif*	ļ					5.4 CITY -		IP	<u>.</u>					
TITLE]				DELETE	6.1 TITLE		}					Change	Addition
NAME						6.2 NAME								
STREET ADDRESS						6.3 STREE	T ADI	DRESS						

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

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/97

813-875-3441

FILED

Apr 28 1997 8:00am

Secretary of State

Daytime Phone #

3R2E034 (9/96)