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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000085088 (8)

BIG BASIN INVESTMENT GROUP, INC.

FILED Mar 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I CARDINARIO LES CALLES ANTON ARROLD RADIST MANTE ARRE	'A' IBAET DINI BATAT 1846) IEN EOU.	
2348 SUNSET POINT ROAD CLEARWATER FL 34625			2348 SUNSET POINT ROAD CLEARWATER FL 34625		DO NOT WRITE IN 1	THIS SPACE
					3. Date Incorporated or Qualified	
					10/11/1996	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3416665	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Cily & State	<u> </u>		6. Election Campaign Financing	\$5.00 May Be
Zip Country		28	Zip Country		Trust Fund Contribution	
24	25 29 30		├ ─┐	8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24]	g. Name and Address of Curre		[30]		10. Name and Address of New Registe	
DC				81 Name	10.	
PEACOCK, RAY 2348 SUNSET POINT ROAD				82 Street Address (P.O. Box Number is Not Acceptable)		
CL	EARWATER FL 34625			83		
			- 1	84 City		85 Zip Code
				- 1		
11. Pursuant office or ragent 1 a	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the obli	502 and 607.1508, Florida State of Florida State of Florida Such change wigations of Section 607.0505	atules, the ab as authorized , Florida Stati	oove-named con toy the corpora utes.	rporation submits this statement for the purpo- ation's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	over and the deposits of	(NC)16 . Registered	Agent gidentite too	uired when reinstaling) Di	ATE
12.		ND DIRECTORS	13.	Many advances and	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TiT	LE T	710 10 10 10 10 10 10 10 10 10 10 10 10 1	Change Addition
NAME	CRITCHLOW, RAY	 -	1.2 NA			
STREET ADDRESS	7423 BALLENTINE			REET ADDRESS		
CITY-ST-ZIP	SHAWNEE KS 66203			Y-ST-ZIP		
TITLE	VP DELETE		2.1 TIT			Change Addition
NAME	MODREIN, KATHY		2.2 NA	1		
STREET ADDRESS	13007 W. 116 ST.			REET ADDRESS		
CITY-ST-ZIP	OVERLAND PARK KS 66210)		TY-ST-ZIP		
TITLE	S	DELETE	3.1 TIT			☐ Change ☐ Addition
NAME	CRITCHLOW, DONNA		3.2 NA	ME		1
STREET ADDRESS	7423 BALLENTINE			REET ADDRESS		
CITY-ST-ZIP	ALLES WE MA ARRA			TY-ST-ZIP		
TITLE			4.1 TIT			Change Addition
NAME	MODACIN, BOB		4 2 N	AME		
STREET ADDRESS	13007 W. 116 ST.		4.3 ST	REET ADDRESS		
CITY-ST-ZIP	OVERLAND PARK KS 66210)	4.4 CI7	Y-ST-ZIP		
TITLE		DELETE	5.1 TIT		***************************************	Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 ST	REET ADDRESS		
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP		
TITLE		DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET ADDRESS	•	
CITY - ST - ZIP				Y-ST-ZIP	Ü	ļ
	portify that the information numbered	with this filing does not evoli			o Contine 110 07/2\/i\ Elorida Statutas, Lfurth	or portify that the information

Interiory certify that the information supplied with this filling does not quality 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 openior 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 chapted, or on in gradient with an address.