

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90023 015 ***150.00

DOCUMENT # P97000018626

1. Corporation Name

BIG BLUE SKY ENTERPRISES, INC.



Principal Place of Business

~~977 SW 114TH TERR~~
~~FT. LAUDERDALE FL 33325~~
~~US~~

Mailing Address

P O BOX 551345
FT. LAUDERDALE FL 33355-1345
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1997

4. FEI Number

65-0726389

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 977 S.W. 114TH TERR
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

DAVIE, FL

28 City & State

24 Zip Country

33325 USA

29 Zip Country

30

9. Name and Address of Current Registered Agent

ADAMS, ROY F SR.

~~977 SW 114TH TERR~~
~~FT. LAUDERDALE FL 33325~~

10. Name and Address of New Registered Agent

81 Name
Adams Roy F SR.

82 Street Address (P.O. Box Number is Not Acceptable)

977 SW 114TH TERR

83

84 City FL 85 Zip Code

DAVIE, FL 33325

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

Roy F Adams

(NOTE: Registered Agent signature required when reinstating)

2/11/99

DATE

12. OFFICERS AND DIRECTORS

TITLE PVPD ☐ DELETE

NAME ADAMS, JANICE M
STREET ADDRESS 977 S W 114TH TERR
CITY-ST-ZIP FT. LAUDERDALE FL 33325

TITLE D ☐ DELETE

NAME ADAMS, ROY F SR.
STREET ADDRESS 977 SW 114TH TERR
CITY-ST-ZIP FT. LAUDERDALE FL 33325

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 PVPD ☒ Change ☐ Addition

1.2 NAME Adams Janice M.
1.3 STREET ADDRESS 977 SW 114TH TERR
1.4 CITY-ST-ZIP DAVIE, FL 33325

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Adams Roy F. Sr.
2.3 STREET ADDRESS 977 S W 114TH TERR
2.4 CITY-ST-ZIP DAVIE, FL 33325

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: *Janice M. Adams* / JANICE M. ADAMS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/99 954-474-1175

Date

Daytime Phone #

CR2E034 (11/98)

0319254