FILED FOR PROFIT CORPORATION Jun 19, 2002 8:00 am **Secretary of State DOCUMENT#** 06-19-2002 90459 033 ***150.00 Source ONE ForwishINGS DO NOT WRITE IN THIS SPACE 3. Mailing Address Principal Place of Business DO NOT WRITE NO THE STAR 6 12007 MUAMA Suite, Apt. #, etc Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-345*9*937 Not Applicable AN4MA \$8.75 Additional Country Zip 5. Certificate of Status Desired Country Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE (NOTE: Registered Agent signature required when reinstating) printed name of registered agent and title if applicable January 1 - May 1 Fee is \$150.00 \$5.00 May Be 10. Election Campaign Financing 9. This corporation is eligible to satisfy its Intangible After May 1, Fee Is \$550.00 Added to Fees Trust Fund Contribution. Tax filing requirement and elects to do so. Amended UBR is \$61.25 Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS CR2E034B (12/01 11. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME DO NOT WRITE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP. CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered. SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Doct Pt97000058816 869766

To Whom It May Concern:

With regards to the corporation Big Dog Investments DBA Source One Furnishings, I would like to apologize for the untimely manner in which we renewed our annual business report. Our fees and documentation were sent to your division prior to the required deadline, but unfortunately the documentation was not complete and subsequently returned to us for completion. Due to internal employee turnovers the returned documents were not brought to my attention until after the 30 day re-submission deadline. Since the original documents and fees were submitted in good faith and in a timely fashion, I would appreciate your consideration in the matter of waving the additional late fees. Again my sincerest apologies. Thank you.

Pres.

BIG 206_TWESTMENTS INC

12007 Panama City Beach Parkway Source One Furnishings

Panama City Beach FL 32407

Fax: 850-234-3650 Phone: 850-234-3040

BIG DOG INVESTMENTS, INC. d/b/a/

SOURCE ONE FURNISHINGS JESSE FLETCHER, President

13-07-041113-29-8 (See attached)

59-3459937 FEDERAL ID #:

CORPORATION:

FLORIDA TAX ID#:

00-518-8813

DUNS #: