## ₱ °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

## DOCUMENT # **P98000093243**1. Corporation Name

BIG PIG I, INC.

Principal Place of Business

Mailing Address

## FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90065 036 \*\*\*150.00



3. Date Incorporated or Qualifed 11/03/1998 4. FEI Number 59-3543069  5. Certificate of Status Desired  6. Election Campaign Financing  \$5.00 May Be	
59-3543069 Not Applicable  5. Certificate of Status Desired Sa.75 Additional Fee Required	
5. Certificate of Status Desired   \$8.75 Additional Fee Required	
5. Certifcate of Status Desired Fee Required	
CE OO Marine	
6. Election Campaign Financing Trust Fund Contribution  S5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax.	
10. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
amed corporation submits this statement for the purpose of changing its registered	

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS IN 12.

	Signature, typed or printed name of registered agent and title if applicable. (NOTE: F	agistated Agent signature required	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1,1 πΓLE	☐ Change ☐ Addition
NAME	MEINER, SAM	1.2 NAME	
STREET ADDRESS	2221 LEE ROAD SUITE 22	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789	1.4 CITY-ST-ZIP	
τιτιΕ	D DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	THOMAS, BRYAN M	2.2 NAME	
STREET ADDRESS	2221 LEE ROAD SUITE 22	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789	2. 4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	( DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DOELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY OF 710 '.	laren a ar s	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 supplimental 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 of the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATION SAM Meiner Pres./Dir.

2/11/99

407/644-9319

Daytime Phone #