


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90193 006 ***150.00

DOCUMENT # P99000012310	
1. Entity Name LITTLE BIG WORLD, INC.	

Principal Place of Business 8325 RIVER HIGHLAND PL TEMPLE TERRACE, FL 33617	Mailing Address 8325 RIVER HIGHLAND PL TEMPLE TERRACE, FL 33617
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94070195



2. Principal Place of Business 3812 N. Armenia Ave. Tampa	3. Mailing Address Suite, Apt. #, etc.
City & State Tampa, FL	City & State

04202004 Chg-P CR2E034 (10/03)

Zip 33607	Country USA	Zip	Country
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4. FEI Number 59-3558458	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HUNT, MARY E 8204 GREENLEAF CIRCLE TAMPA, FL 33615	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MC CLOUD, JUANITA J 8238 GREENLEAF CIRCLE TAMPA, FL 33615 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8325 River Highland Pl. Tampa, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MC CLOUD, RAYMOND 8238 GREENLEAF CIRCLE TAMPA, FL 33615 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8325 River Highland Pl. Tampa, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTLER, DAMION 8238 GREENLEAF CIRCLE TAMPA, FL 33615 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8325 River Highland Pl. Tampa, FL 33617
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juanita McCLOUD Juanita McCLOUD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 4/26/04 Daytime Phone # (813) 893-0873