

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91052 046 ***150.00

DOCUMENT # P99000065531

1. Entity Name
BIG FISH-2000, INC.



Principal Place of Business
**55 S.W. MIAMI AVENUE ROAD
MIAMI, FL 33130**

Mailing Address
**55 S.W. MIAMI AVENUE ROAD
MIAMI, FL 33130**

44043953



04212004 Chg-P CR2E034 (10/03)

4. FEI Number
65-0945329 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOTTIGLIERI, GIUSEPPE
55 S.W. MIAMI AVENUE ROAD
MIAMI, FL 33130**

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 _____ (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. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **COREA, ANA**
STREET ADDRESS **55 S.W. MIAMI AVENUE ROAD**
CITY-ST-ZIP **MIAMI, FL 33130**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD-Tr-Sec.** ☒ Change ☐ Addition
NAME **Giuseppe Bottiglieri**
STREET ADDRESS **55 SW Miami Ave Rd**
CITY-ST-ZIP **Miami, FL 33130**

TITLE ☒ Change ☐ Addition
NAME **Riccardo Beka VP**
STREET ADDRESS **55 SW Miami Ave Rd**
CITY-ST-ZIP **Miami, FL 33130**

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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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: *Giuseppe Bottiglieri* **PD**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04 305-373-1770
Date Daytime Phone #