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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name S17337

BIG "B" CONTRACTORS, INC.

Mailing Address

Principal Place of Business SIL BOSS BOAD

211 0000 0040

FILED Jul 07 1998 8:00am Secretary of State



TALLAHASSEE FL 32310			TALLAHASSEE FL 32310				DO NOT WINTE IN THE	DACE			
							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
							12/10/1990				
2. Principal Pl	ace of Busing	ss)	2a. Mailing Address				4. FEI Number		Applied For		
21 3/1 K	OH K	ef.	26 -AME				59-3037046	Typhica i Gi			
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional				
City & State	· · · · · · · · · · · · · · · · · · ·		City & State				Fee Required				
23 /AU		A.	28				Election Campaign Financing Trust Fund Contribution				
323/	0	Country	Zip		untry	<i>!</i>	8. This corporation owes or has paid the curr	- ·			
24 / 0 / 1		and Address of Curren	29 t Registered Agent	30	T		Personal Property Tax due June 30. 10. Name and Address of New Registered A	J Yes	∐No		
BROWN, RUSSELL S 81							Name				
311 ROSS RD											
TALLAHASSEE FL 32310						82 Street Address (P.O. Box Number is Not Acceptable)					
•											
					84	City		85 Zi	p Code		
44 Discourant to	o the provision	no of Postions 607 050	2 007 1500 51			l -	FL	11	`		
11. Pursuant to the provisions of Socious 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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											
agenic train raminal with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Signature, typed or	printed name of registered ages	nt and title if applicable	(NOTE: Reasters	d Ane	ant signature re	quired when reinstating) OATE	9	· · · · · · · · · · · · · · · ·		
12.		OFFICERS AND		13.	.8,		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DRS IN 12		
TITLE	ÞVΤ		DELETE	1.1 T	ITLE			☐ Change			
NAME		RUSSELL S.		1.2 NA		1					
STREET ADDRESS	311 ROS			1.3 S	1.3 STREET ADDRESS						
CITY-ST-ZIP	TALLAHA	ASSEE FL		1.4 C	ITY-S	it - ZIP					
TITLE			L_ DELETE	2.1 To	TLE			Change	Addition		
NAME				2.2 N	AME						
STREET ADDRESS				2.3 STREET ADDRESS			· ·				
CITY-ST-ZIP TITLE					2. 4 CITY - ST - ZIP 3.1 TITLE			100			
NAME			L_ DELETE				· · · · · · · · · · · · · · · · · · ·	Change	Addition		
NAME STREET ADDRESS				3.2 NAI		ADDDECC					
CITY-ST-ZIP			3.3 STREI 3.4. CITY								
TITLE			DELETE	3.4. C		DI-EIP		Change	Addition		
NAME	_				4. 2 NAME		'	change	Addition		
STREET ADDRESS	j i				4.3 STREET ADDRESS						
CITY-ST-ZIP				4.4 CI							
TITLE	_		DELETE	5.1 1				Change	Addition		
NAME				5.2 N/	5.2 NAME			·	ļ		
STREET ADDRESS	ET ADDRESS 5.			5.3 ST	REET	ADDRESS					
CITY-ST-ZIP			. <u></u>	5.4 CI	TY-S	1 - 21P					
TITLE			DELETE	6.1 71	1LE		A selection on the contract of	Change	Addition		
NAME				6.2 N	6.2 NAME		40000258231		V 1		
STREET ADDRESS						ADDRESS	-07/08/9801011026 ***550.00	•	J'4' \		
CITY-ST-ZIP	etifu that the	nformation execution in	h this files does not a -1	6.4 CI	TY-S	T-ZIP			* 1		
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 roceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.											