2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000148

City-St-Zip:

TALLAHASSEE, FL 32303

Entity Name: BIG ELECTRONIC NETWORK INC.

FILED May 02, 2008 Secretary of State

| | e. blo ele. | ontoline inclination, into. | | | |
|---|--|---------------------------------------|---|--|--|
| Current P | rincipal Place | e of Business: | New Principal Place | New Principal Place of Business: | |
| | ITAL MEDICAI SSEE, FL 323 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 2708 SET | EITH BLOODW TER PLACE SSEE, FL 323 | | | | |
| FEI Number: 59-3688919 FEI Number Applied For (| | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| 2708 SET | ORTH, M. KEI TER PLACE SSEE, FL 323 | | | | |
| | named entity e of Florida. | submits this statement for the լ | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| | | 3(2)(b), F.S., the corporation did no | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | , | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VD (UGA, MICHAEI 1818 HOMEWO TALLAHASSEE | OOD RD | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | , |) Delete H, M. KEITH III PLACE | Title: Name: Address: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: M. KEITH BLOODWORTH, III STD 05/02/2008