


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000047084 1. Entity Name THE BIG BREAD NET INC.	
---------------------------------------------------------------------	-----------------------------------------------------------------------------------

Principal Place of Business CORAL RIDGE MALL 3200 N FEDERAL HWY SHOP 411 B FORT LAUDERDALE, FL 33308	Mailing Address CORAL RIDGE MALL 3200 N FEDERAL HWY SHOP 411 B FORT LAUDERDALE, FL 33308
---------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



02232004 No Chg-P CR2E034 (10/03)

4. FBI Number 65-1114190	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent POIRIER, MARCELLE B ESQ. 2701 SOUTH BAYSHORE DRIVE SUITE 402 MIAMI, FL 33133	DO NOT WRITE IN THIS SPACE
----------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------

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 title 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	U000000135708 04/28/04-80069-019 150.00
-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------	--------------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AUDEOUD, MAURICE L 3200 N FED HWY SHOP 41 B FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AUDEOUD, LUC RAYMOND 1736 N.E. 28TH DRIVE WILTON MANORS, FL 33334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *M. B. Poirier* 04.26.04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #