

FILED  
May 01, 2006 08:00 AM  
Secretary of State

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                    |                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P00000027716</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                    |                                          |
| 1. Entity Name<br><b>TECHNET CAPITAL CORP.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                    |                                                                                                                           |
| Principal Place of Business<br><b>C/O WILLIAM R. PAUL<br/>4104 STILLWATER TERRACE COVE<br/>TAMPA, FL 33624</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Mailing Address<br><b>C/O WILLIAM R. PAUL<br/>4104 STILLWATER TERRACE COVE<br/>TAMPA, FL 33624</b> |                                                                                                                           |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                    |                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                    | 04202006 No Chg-P CR2E034 (11/05)                                                                                         |
| 4. FEI Number<br><b>59-3634619</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                    | Applied For<br>Not Applicable                                                                                             |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                    | <b>\$8.75</b> Additional Fee Required                                                                                     |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                    |                                                                                                                           |
| <b>PAUL, WILLIAM R<br/>C/O RUDEN MCCLOSKEY ET AL<br/>401 E JACKSON ST STE 2700<br/>TAMPA, FL 33602</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                    | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                     |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                    |                                                                                                                           |
| <b>FILE NOW!! FEE IS \$150.00<br/>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                    | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                    |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PO<br>PAUL, WILLIAM R<br>4104 STILLWATER TERR COVE<br>TAMPA, FL 33624                              | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VD<br>BERKMAN, MONROE E<br>3401 S BEACH DR<br>TAMPA, FL 33629                                      |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VD<br>GOLDFEDER, LOUIS B<br>919 MOORING CIRCLE<br>TAMPA, FL 33602                                  |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | TD<br>COHEN, ROBERT<br>12414 STILLWATER TERR<br>TAMPA, FL 33624                                    |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>THORNBRUGH, J D<br>4959 BAYSHORE BLVD<br>TAMPA, FL 33611                                      |                                                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | S<br>PAUL, VICKI L<br>4104 STILLWATER TERR COVE<br>TAMPA, FL 33624                                 |                                                                                                                           |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>William R. Paul</i> <b>William R. Paul, President</b> 4/25/06 (813) 222-6607                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                    |                                                                                                                           |