


03-11-2003 90134 018 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P0000027716

1. Entity Name
TECHNET CAPITAL CORP.



90047383

Principal Place of Business C/O WILLIAM R. PAUL 4104 STILLWATER TERRACE COVE TAMPA, FL 33624	Mailing Address C/O WILLIAM R. PAUL 4104 STILLWATER TERRACE COVE TAMPA, FL 33624
--	--



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3634619	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

~~PAUL, WILLIAM R.~~ **WILLIAM R. PAUL**
**C/O RUDEN MCCLOSKEY ET AL
401 E JACKSON ST STE 2700
TAMPA, FL 33602**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAUL, WILLIAM R 4104 STILLWATER TERR COVE TAMPA, FL 33624	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BERKMAN, MONROE E 3401 S BEACH DR TAMPA, FL 33629	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOLDFEDER, LOUIS B 919 MOORING CIRCLE TAMPA, FL 33602	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COHEN, ROBERT 12414 STILLWATER TERR TAMPA, FL 33624	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THORNBRUGH, J D 4959 BAYSHORE BLVD TAMPA, FL 33611	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PAUL, VICKI L 4104 STILLWATER TERR COVE TAMPA, FL 33624	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: William R. Paul William R. Paul March 6, 2003 813-222-6607
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Current Phone #

CR2E034 (10/02)

Attachment

90047383
~~P00000027716~~

RUDEN
MCGLOSKY
SMITH
SCHUSTER &
RUSSELL, P.A.
ATTORNEYS AT LAW

2700 SUNTRUST FINANCIAL CENTRE
401 EAST JACKSON STREET
TAMPA, FLORIDA 33602-5841

(813) 222-6607
FAX: (813) 314-6907
WRP@RUDEN.COM

March 6, 2003

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, Florida 32302-1500

Re: Technet Capital Corp.
Document #P00000027716
2003 Uniform Business Report

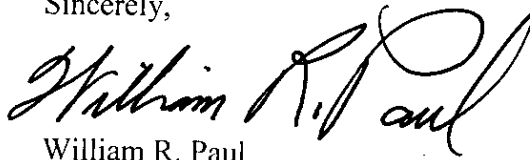
Ladies and Gentlemen:

Please find enclosed the 2003 For Profit Corporation Uniform Business Report for the referenced corporation, together with a check from the corporation in the amount of \$150 payable to the Florida Department of State.

Please change your records on this form to reflect the listing of my name as registered agent as **William R. Paul**, rather than using the "last name first" approach, which causes confusion. I have made that correction on the enclosed report.

Please also find enclosed an extra copy of this report which I request that you date stamp to reflect the filing and return to me in the enclosed stamped and self-addressed return envelope. Thank you very much for your cooperation.

Sincerely,


William R. Paul

WRP/jk
Enclosures