

**2006 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

ATX1

DOCUMENT # P04000136161  
1. Entity Name  
BLUESTORIES INC

FILED  
06 APR -6 AM 11:19  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
709 Crandon Blvd  
Suite, Apt. #, etc.  
409  
City & State  
Key Biscayne, FL

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip  
33149

Country

4. FEI Number  
98-0446970

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

05-06  
DO NOT WRITE IN THIS SPACE

**DO NOT WRITE IN THIS SPACE**

7: Name and Address of Current Registered Agent

Name  
Yves Soyfer


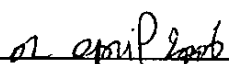
Street Address (P.O. Box Number is Not Acceptable)  
709 Crandon Blvd 409

City  
Key Biscayne

FL

Zip Code  
33149

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  Yves Soyfer, Registered Agent, President 

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

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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	P/S Yves Soyfer 709 Crandon Blvd # 409 Key Biscayne, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	700070463717 04/14/06-01056-010 \$150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	700070463717 04/14/06-01056-011 \$150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  Yves Soyfer 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

March 31, 2006

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Bluestories Inc., Document P0400013661


Dear Sir/Madame:

Attached is a 2005 Corporation Reinstatement for the above referenced corporation, along with the 2005 UBR. I did not receive your notice, as you can see I have a different address from the one you had on file.

Also attached is the 2006 UBR changing the Registered Agent name and address.

I am enclosing \$300 to cover the fees of both years for both corporations.

Thank you,

  
Yves Soyfer