## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000154606

Entity Name: BLUE PACIFIC INC

FILED Aug 09, 2007 Secretary of State

| •   |                                    |  |   |  |  |
|---|------------------------------------|--|---|--|--|
| Current Principal Place of Business:  |                                    |  | New Principal Plac                          | ce of Business:                              |  |
|   | NFIELD CROS<br>STINE, FL 320       |  |   |  |  |
| Current Mailing Address:  |                                    |  | New Mailing Addre                           | New Mailing Address:                         |  |
|   | NFIELD CROS<br>STINE, FL 320       |  |   |  |  |
| FEI Number: 20-2064582 FEI Nun  |                                    | FEI Number Applied For()                     | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |                                    |  |   |  |  |
|   | NH<br>NFIELD CROS<br>STINE, FL 320 |  |   |  |  |
|   | named entity<br>of Florida.        | submits this statement for the p             | ourpose of changing its registe             | ered office or registered agent, or both,    |  |
| SIGNATUR  | RE:                                |  |   |  |  |
| Electronic Signature of Registered Agent  |                                    |  | ent   | Date   |  |
| Election Car  | npaign Financin                    | g Trust Fund Contribution ( ).               |   |  |  |
| OFFICERS AND DIRECTORS:   |                                    |  | ADDITIONS/CHAN                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PANGAN, TED                        | ) Delete<br>BLVD., APT. #1503<br>E, FL 32224 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | MINH LE, TRI                       | ) Delete<br>IELD CROSSING CT.<br>E, FL 32092 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () 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.

SIGNATURE: TRI MINH LE PRES 08/09/2007