## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000166176

TUNA, OMER É

2613 ROSE HAVEN DRIVE

WESLEY CHAPEL, FL 33563

Name:

Address:

City-St-Zip:

FILED Jan 16, 2006 Secretary of State

Entity Na	me: BLUE	NET TECHNOLOGIES	S, INC.				•	
Current Principal Place of Business:				New Princi	New Principal Place of Business:			
2613 ROSEHAVEN DR WESLEY CHAPEL, FL 33543					9643 GRETNA GREEN DRIVE TAMPA, FL 33626			
Current Mailing Address:				New Mailir	New Mailing Address:			
2613 ROSEHAVEN DR WESLEY CHAPEL, FL 33543				9643 GRETNA GREEN DRIVE TAMPA, FL 33626				
FEI Number	: 33-1107527	FEI Number Applie	d For()  FE	l Number Not Appli	cable ( )	Certificate of Stat	us Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
9421 TRA ORLANDO The above	JOHN V.A. DEPORT D D, FL 3282 named ent e of Florida.	RIVE	ent for the purpo	se of changing it	s registered	office or registered	d agent, or both,	
SIGNATU								
Electronic Signature of Registered Agent						Date		
Election Ca	mpaign Finan	cing Trust Fund Contribu	ition ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	D OZTURK, H 15350 AME TAMPA, FL	ERLY DRIVE #723		Title: Name: Address: City-St-Zip:	OZTURK, HIL 30949 PROU		n	
Title: Name: Address: City-St-Zip:		() Delete :EM RY CREST STREET #20 HAPEL, FL 33563	5	Title: Name: Address: City-St-Zip:	D ( KOCA, KEREI 9643 GRETN/ TAMPA, FL 3	A GREEN DR.	n	
Title <sup>.</sup>	D	( ) Delete		Title <sup>.</sup>	(	) Change ( ) Addition	n	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: HILMI A OZTURK D 01/16/2006