

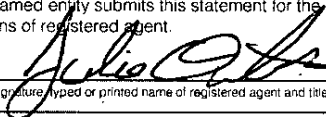
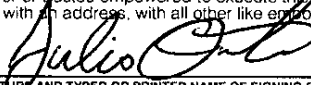


2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

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DOCUMENT # K41672 1. Entity Name BANANA CAY APTS., INC.						FILED 05 NOV -7 PM 11:40 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 1637 EAST VINE ST STE E KISSIMMEE, FL 34744				Mailing Address 1637 EAST VINE ST STE E KISSIMMEE, FL 34744			
2. Principal Place of Business 401A Banana Cay Dr.		3. Mailing Address 401A Banana Cay Dr.					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State Daytona Beach, FL		City & State Daytona Beach, FL					
Zip 32119		Country USA		4. FEI Number 59-2920656		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				10192005 Chg-P CR2E034 (10/03)			
6. Name and Address of Current Registered Agent TOMPKINS, THOMAS N. 1731 BOGGY CREEK ROAD KISSIMMEE, FL 34744				7. Name and Address of New Registered Agent Name QUINTANA, JULIO Street Address (P.O. Box Number is Not Acceptable) 8004 NW 154 ST Suite 243 City Miami Lakes FL Zip Code 33016			
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  <small>Signature typed or printed name of registered agent and title if applicable.</small>				DATE 10/13/2005 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution... <input type="checkbox"/> \$5.00 May Be Added to Fees		500061184625 11/07/05--01011--001 **61.25	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TOMPKINS, THOMAS N 1731 BOGGY CREEK RD KISSIMMEE, FL <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/O. QUINTANA, Jorge 8004 NW 154 ST Suite 243 Miami Lakes, FL 33016 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TOMPKINS, THOMAS N. 1731 BOGGY CREEK ROAD KISSIMMEE, FL <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/O Lage, Angel 8004 NW 154 ST Suite 243 Miami Lakes, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST ROUNSEVILLE, ROY H. 3709 S.E DOUBLETON DRIVE STUART, FL <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST/O Quintana, Julio 8004 NW 154 ST Suite 243 Miami Lakes, FL 33016 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RONNSEVILLE, ROY H 3709 SB DOUBLETON DR. STUART, FL <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIXON, KEN 1637 E VINE ST KISSIMMEE, FL 34744 <input type="checkbox"/> Delete			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"/> Delete			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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE 10/13/2005 <small>Date</small>		DAYTIME PHONE 305-556-6898 <small>Daytime Phone #</small>	

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LAW OFFICES
Ceasar Mestre, Jr.
Royal Palm Plaza
7600 West 20th Ave, Suite 220 · Hialeah, FL 33016

Ceasar Mestre, Jr.

Telephone: 305-824-9032
Fax: 305-824-9442
cmestrelawfirm@aol.com

October 13, 2005

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Banana Cay Apts., Inc.

Dear Sir/Madam:

Enclosed please find the Amended Annual Report of the above-referenced corporation, our check in the amount of \$61.25, which represents the filing fee, and a prepared envelope to be used to return the acknowledgment copy to my office.

Should you need anything further, please contact my office.

Very truly yours,



CEASAR MESTRE, JR., ESQ.

CMJ/lg

Enclosure