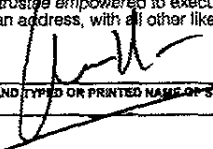


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 25, 2007 08:00 A
Secretary of State**

DOCUMENT # P03000101848 1. Entity Name BANYM, INC.		
Principal Place of Business 16850-112 COLLINS AVE., SUITE 269 SUNNY ISLES BCH, FL 33160	Mailing Address 16850-112 COLLINS AVE., SUITE 269 SUNNY ISLES BCH, FL 33160	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MULLER, YVES 16850-112 COLLINS AVENUE, STE 269 SUNNY ISLES BEACH, FL 33160		DO NOT WRITE IN THIS SPACE
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		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 MULLER, NATHANIEL 16850-112 COLLINS AVE., SUITE 269 SUNNY ISLES BCH, FL 33160	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JANUARY 23, 2007 - 7863072042 Date Daytime Phone #		



01232007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0235618	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

000000603457
01/29/07-80015-001 150.00

**DO NOT WRITE
IN THIS SPACE**