(Re	equestor's Name)		-
(Ad	dress)		-
(Ad	dress)		.
(Ćit	y/State/Zip/Phone	#)	-
PICK-UP	WAIT	MAIL	
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(Do	ocument Number)		-
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:]
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	_			
SUBJECT: BANNA CO	ORP			
(Name of corpora	tion - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	or Authorization to Transact Business in Florida", o register the above referenced foreign corporation			
Please return all correspondence concerning this mat	ter to the following:			
Angkanaluck	kumwiang			
·	of Person)			
BANNA CORP.				
(Firm/C	Company)			
1. NE. Eglin	Parkway.			
(Ac	idress)			
Fort Walton Be	each, FL 32548 FEB B			
(City/Stat	e and Zip code) ARR 30			
For further information concerning this matter, please call: Angkanaluck kumwiang at (850) 243-5748				
Angkanaluck kumwiang at (850) 243-5748 (Name of Person) (Area Code & Daytime Telephone Number)				
(Are	a Code & Daytime Telephone Number)			
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following amount:				
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.		
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	ANGKANA CORP.	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2.	Washington state (State or country under the law of which it is incorporated) (FEI number, if applicable)	
1	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	(Date of incorporation) 5. 1 yew (Duration: Year corp. will cease to exist or "perpetual")	
6.	2/16/2005	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502 F.S. to determine penalty liability)	
7	1 NE. Eglin Parkway Fort Wulton Beach, FL 32548 (Principal office address)	
	1 NE. Eglin Parkway Fort Walton Beach, FL 32548 (Current mailing address)	
	(Current maning address)	
8.	Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
	(Purpose(s) of corporation authorized in notice state of country to be carried out in state of Floriday	-
9.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	*****
	Name: Angkanaluck kumwiang Tice Address: I NE. Eglin Parkway	
Of	Tice Address: 1 NE Eglin Parkway	li I
	Fort Walton Beach, Florida 32548	
	(City) (Zip code)	

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
D. OFFICEDS
B. OFFICERS
President: Angkanaluck kumwiang
Address: 17 Shell Ave. SE Clo.
Fort Wulton Beach, FL 32548
Vice President: Sugram Writing
Address: 11 Shell Add. Siz CO
1817 Walton Seach, FL 32548
Secretary: <u>Sangiam</u> Kumwiang Address: <u>D Shell Ave. SE Cb Fort Walson Beech</u> , FL 32548
Address: 17 Shell Ave. SE Clo Fort Walson Beach, FL 32548
Address: 17 Shell Ave. SE. Che Fort Walton Beach, FL 32548
Address: 17 Shell Ave. SE. CL Fort Woldon Beach, FL 32548
NOTE: If account, you may attack an addardom to the application listing additional affigure and/or directors
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
14. ANGKANALUCK KUMWIANG
(Typed or printed name and capacity of person signing application)



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF BANNA CORP.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 1/20/2004.

I FURTHER CERTIFY that as of the date of this certificate, BANNA CORP. remains active and has complied with the filing requirements of this office.

Date: March 22, 2005

UBI: 602-357-713

STATE OF THE STATE

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State