2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005240

Entity Name: DATABANQ INTERNET MEDIA SERVICES, INC.

FILED Feb 12, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
6409 WELLINGTON DRIVE ORLANDO, FL 32819				1505 EAST ROBINSON STREET ORLANDO, FL 32801		
Current M	lailing Addre	ss:	New Ma	New Mailing Address:		
	LINGTON DR), FL 32819	IVE		AST ROBINSON STREET NDO, FL 32801		
FEI Number:	: 20-5314231	FEI Number Applied For()	FEI Number Not A	Applicable () Certificate of Status Desired (()	
Name and	Address of	Current Registered Agent:	Name a	and Address of New Registered Agent:		
ONE NOR	CORPORATE TH CLEMATI LM BEACH, F	SERVICES, INC. S STREET, SUITE 400 L 33401 US				
	named entity of Florida.	submits this statement for the p	urpose of changir	ng its registered office or registered agent, or	both,	
SIGNATUF	RE:					
	Electro	nic Signature of Registered Age	nt	Date		
Election Car	npaign Financir	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PTD (BAYER, DAVIE 6409 WELLIN ORLANDO, FL	GTON DRIVE	Title: Name: Address: City-St-Zi			
Title: Name: Address: City-St-Zip:	VSD (KITEME, KAMI 6409 WELLIN ORLANDO, FL	GTON DRIVE	Title: Name: Address: City-St-Zi			
Title: Name: Address: City-St-Zip:	BOYLE, JAME	RCH PARKWAY, SUITE 300	Title: Name: Address: City-St-Zi			
Title: Name: Address: City-St-Zip:	BARACH, MIC 430 MAIN STR		Title: Name: Address: City-St-Zi			
Title: Name: Address: City-St-Zip:	STONE, PETE	OF THE AMERICAS	Title: Name: Address: City-St-Zi			

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.

SIGNATURE:	DAVID BAYER	PTD	02/12/2007