


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun-28, 2007 08:00 AM
Secretary of State

DOCUMENT # F97000004588 1. Entity Name AMERICAN BANNER RESOURCES, INC.	
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Principal Place of Business P.O. BOX 789 PALM BEACH, FL 33480	Mailing Address P.O. BOX 789 PALM BEACH, FL 33480
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DO NOT WRITE IN THIS SPACE



06112007 No Chg-P CR2E034 (11/05)

4. FEI Number 95-3691114	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MILLER, THOMAS A.N. 1440 NORTH LAKE WAY PALM BEACH, FL 33480

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) DATE

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P/D MILLER, THOMAS A.N. 225 WEST STATION SQ. DRIVE, SUITE 200 PITTSBURGH, PA 15219
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD CSENDES, NICHOLAS 225 WEST STATION SQ. DRIVE, SUITE 200 PITTSBURGH, PA 15219
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06/29/07-80002-008 550.00

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:  **6/15/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #