
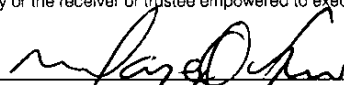


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90354 006 \*\*\*\*50.00

<b>DOCUMENT # L04000036339</b> 1. Entity Name <b>BAYON INVESTMENTS, LLC</b>					
Principal Place of Business <b>120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>			Mailing Address <b>120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>PO Box 268263</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State <b>WESTON, FL</b>		4. FEI Number <b>20-1122521</b>	
Zip		Zip <b>33326</b>		Country <b>USA</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>OYON, MAYENNE 120 LAKEVIEW DR #202 WESTON, FL 33326</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS / MANAGERS</b>			<b>10. ADDITIONS / CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM OYON, MAYENNE 120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM OYON, GRAZIELLA 120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM OYON, ROSELENI 120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM OYON, LIEZNITZA 120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM OYON, JOSE 120 LAKEVIEW DRIVE, #202 WESTON, FL 33326</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			SIGNATURE: 		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date <b>4/18/07</b> Daytime Phone #		