## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001048

FILED Apr 11, 2007 Secretary of State

Entity Name: BE.IN.ME. INC	
Current Principal Place of Business:	New Principal Place of Business:
4525 OAK HAVEN DR. 102 ORLANDO, FL 32839	
Current Mailing Address:	New Mailing Address:
4525 OAK HAVEN DR.	The William of The Control of the Co
102 ORLANDO, FL 32839	
FEI Number: 05-0610522 FEI Number Applied For ( ) FEI Number	mber Not Applicable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
BENN, DERRICK L 4525 OAK HAVEN DR. 102 ORLANDO, FL 32839 US	BENN, DERRICK L P 4525 OAK HAVEN DR. 102 ORLANDO, FL 32839 US
The above named entity submits this statement for the purpose of in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: DERRICK L BENN	04/11/2007
Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: P ( ) Delete Name: BENN, DERRICK L Address: 4525 OAK HAVEN DR. City-St-Zip: ORLANDO, FL 32839  Title: ( ) Delete Name: Address:	Title: P (X) Change () Addition Name: BENN, DERRICK L P Address: 4525 OAK HAVEN DR. City-St-Zip: ORLANDO, FL 32839 US  Title: VP () Change (X) Addition Name: REYNOLDS, JIM VP Address: 9008 ISLAND BAY CIRCLE
City-St-Zip:  Title: ( ) Delete Name: Address: City-St-Zip:	City-St-Zip: SANFORD, FL 32771 US  Title: S ( ) Change (X) Addition  Name: COUCH, LACRECIA S  Address: 10236 DYLAN ST.  City-St-Zip: ORLANDO, FL 32825 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DERRICK L BENN P 04/11/2007