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Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000003521 (1)

1. Corporation Name
BANIM, INC.



Principal Place of Business
7966 TENNYSON COURT
BOCA RATON FL 33433

Mailing Address
7966 TENNYSON COURT
BOCA RATON FL 33433-4144

3. Date Incorporated or Qualified 11/03/1992	3a. Date of Last Report 02/12/1996
4. FEI Number 65-0370584	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent MARGOLIES, ISRAEL 7966 TENNYSON COURT BOCA RATON FL 33433	10. Name and Address of New Registered Agent
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P MARGOLIES, ISRAEL <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGOLIES, ISRAEL	1.2 NAME	
STREET ADDRESS	7966 TENNYSON COURT	1.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL	1.4 CITY - ST - ZIP	
TITLE	VDT MARGOLIES, MICHAEL Z <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGOLIES, MICHAEL Z	2.2 NAME	
STREET ADDRESS	ONE IBM PLAZA	2.3 STREET ADDRESS	
CITY - ST - ZIP	CHICAGO IL	2.4 CITY - ST - ZIP	
TITLE	VD MARGOLIES, ELLIOT <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGOLIES, ELLIOT	3.2 NAME	
STREET ADDRESS	3205 EMERSON	3.3 STREET ADDRESS	
CITY - ST - ZIP	PALO ALTO CA	3.4 CITY - ST - ZIP	
TITLE	VD MARGOLIES, JOSH <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGOLIES, JOSH	4.2 NAME	
STREET ADDRESS	8203 BLACKLAURN AVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	LOS ANGELES CA	4.4 CITY - ST - ZIP	
TITLE	VD MARGOLIES, JOEL <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARGOLIES, JOEL	5.2 NAME	285 Aycr199 Ave
STREET ADDRESS	7161 N KEDZIE AVE	5.3 STREET ADDRESS	PASSAIC, N.J. 07055
CITY - ST - ZIP	CHICAGO IL	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Israel Margolies ISRAEL MARGOLIES 1/21/97 3917262 (561)
SIGNATURE AND TYPED OR PRINTED NAME OF JOINING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)